

CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

INSIDE
CHEMEX CATALOGUE

24 August 1996

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York man pays price for NHS fraud

Security shutters vetoed despite 20 break-ins

26pc of pharmacies not viable without RPM

Is sickness absence harming your business?

Predicting the next 25 years for Chefaro



Out & About with a drama queen ...

Spotlight on Gehe's UK acquisition agenda

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When your customers

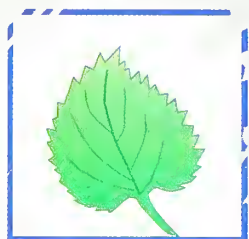


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are itching to scratch,



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you've no better way



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infected skin, including impetigo, cold sores, acne or athlete's foot. The product should not be used in pregnancy or in children under 10 years without medical advice. **Packaging Quantity:** Tube containing 15g. **RSP:** £2.65. **Legal Category:** P. **Product Licence Number:** PL 0327/0039. **Product Licence Holder:** Crookes Healthcare Ltd., Nottingham NG2 3AA. **Date of Preparation:** June 1996.



All of a sudden it's the August Bank Holiday. Fond memories of the summer vacation are submerged by the tide of urgent paperwork and unpaid bills in the in-tray. It's back to business with a bump (as if you ever really got away). September is next weekend and with it two key events in the pharmacy calendar: Chemex in London and the British Pharmaceutical Conference in Glasgow.

Chemex kicks off on September 1. This year, the show moves to London's Olympia, a more intimate venue than the caverns of Wembley, and certainly more central for those intending to make the most of a family outing to the capital. Exhibitor numbers are up on last year, and pre-registrations for the show are at record levels. Over 70 companies have contributed to the 'cheque book' available to pre-registrants, detailing what they will be offering visitors. New attractions this year include seminars and workshops aimed at helping pharmacists build a better business. *C&D* is linking up with Roche Consumer Health to present the latest thinking on anti-oxidant vitamins, for example.

The BPC in Glasgow offers the first chance for most pharmacists to see where the 'Pharmacy in a New Age' consultation process might be taking the profession. For this reason, if no other, it will be important. But falling delegate numbers have put the future format of the BPC in doubt. Like Chemex, it will not achieve its potential if people do not attend. Pharmacists often grumble that they practise in isolation and bemoan the lack of contact with fellow professionals. Chemex and the BPC provide two very different solutions to these complaints, but it is up to pharmacists to use the opportunity. And the more visitors such events get, the better they become. Think long-term – give Chemex or the BPC your support this year.

CHEMIST & DRUGGIST

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CHEMIST & DRUGGIST

THE NEWS WEEKLY FOR PHARMACY

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York pharmacist struck off for £5,000 NHS fraud

A York pharmacist who was jailed after defrauding the NHS of over \$5,000 by inflating his drug bills was struck off the Pharmaceutical Register at a disciplinary hearing this week.

Nicholas Leo Goldstein, the proprietor of Gillygate Pharmacy in York, was sentenced to six months' imprisonment at York Crown Court on January 12 after pleading guilty to four specimen charges representing a total of 70 offences of dishonestly obtaining money by deception.

Josselyn Hill, representing the Royal Pharmaceutical Society at this week's Statutory Committee hearing, said Mr Goldstein was the company director and superintendent pharmacist of the Gillygate Pharmacy.

An investigation was launched when North Yorkshire Family Health Services Authority approached an RPSGB inspector

with concerns about the cost to the NHS of drugs dispensed to registered addicts at the Gillygate Pharmacy.

Society inspector David Slater discovered discrepancies in the pharmacy's Controlled Drugs Register. He told the Committee: "We had far more ampoules endorsed [on prescription] than had ever been purchased."

He explained that Mr Goldstein claimed to use 100mg ampoules on each occasion. In reality, he was using a home-made powder solution which was cheaper, but continued to charge the NHS the full proprietary price for ampoules.

Mr Goldstein told the hearing: "I bitterly regret what I have done. It has brought shame on me and the profession. It was an aberration at a time when there were many great pressures on me, personal and business."

Announcing the decision to strike Mr Goldstein off the Register, Committee chairman Gary Flather QC said: "We have a pharmacist running a business who over the course of 14 months on 70 occasions obtained money from the Pricing Authority which was more than he was entitled to."

"What can be said in support of Mr Goldstein is the massive amount of public support he has received. We cannot remember anyone producing as many references as he has done."

But Mr Flather said the Committee could reach no decision other than to strike him off. "This is dishonesty, a breach of trust. It is a very serious matter. We cannot have pharmacists who act like this."

For further reports from the Royal Pharmaceutical Society's Statutory Committee, see p255.

DoH hoping for judicial review to settle Clothier?

The Department of Health may be pushing to get the so-called Clothier 'loophole' settled by the courts. A dispensing doctors' practice has "had ministerial advice that the only way forward is to go to judicial review".

Dr Ian Greaves, one of four doctors in the dispensing practice in Gnosall, Staffordshire, says that the doctors have been advised to seek a judicial review against the opening of a pharmacy in the village (*C&D* June 8, p785). The doctors are still awaiting leave to proceed.

● In an independent move, a patients' action group is planning to take the fight against TC Cornwell pharmacy to the European courts. The villagers are being advised about how to proceed by their Euro-MP, Michael Tappin.

The group has opposed the opening of the pharmacy on the grounds that patients will lose the services provided by the practice and that their opinion was not taken into account in the granting of the pharmacy contract.

Milk fears to be addressed

Concern over the loss of business caused by the introduction of a revamped pharmacy welfare milk scheme in Birmingham may be resolved next month.

Birmingham Local Pharmaceutical Committee secretary, Tom Wedgbury, has written to the Health Authority requesting a meeting to review the scheme. "There is a definite commitment on both sides to meet. We want to get the pharmacists into the scheme at the earliest date," he says.

The scheme, which started in July after a two-year break (*C&D* July 6, p5), is running on a rota basis, as it was oversubscribed by pharmacists who wished to participate in it.

Customers are being redirected to those pharmacies which are authorised to supply the milk, but pharmacists who are not participating at the outset believe that the time lapse before the rotation means they will lose customers' goodwill.

Mr Wedgbury says that the LPC is "aware of the concerns and fully sympathises with the handful of pharmacists who are not participating".

Surgery employs pharmacist 15 hours a week

A pharmacist has been employed by a group practice hoping to reduce its prescribing budget deficit of \$60,000.

Melanie Bradley has a one-year contract to work 15 hours a week in an advisory role at the six-GP James Street Group Practice in Workington, Cumbria.

Mrs Bradley's main task is to reduce the drugs budget. This will include looking at repeat and generic prescribing, based on the

categories in the *British National Formulary*.

This is the first time that the surgery has been given money specifically to employ a pharmacist, rather than the pharmacist having to justify the position by demonstrating the savings made, says Mrs Bradley. The doctors have also asked if she is willing to work more hours.

It is believed that the contract is one of the first in the region.

July sees increase in pharmacy openings

There was a net opening of 18 pharmacy premises in Great Britain in July, the largest number since December last year.

There were 30 new openings and four restorations to the Register, with 16 deletions. This brings the number of registered premises to 12,236. This compares to the 1995

year end total of 12,224.

Superdrug saw the most activity of the pharmacy multiples, with a net total of ten new pharmacies. Tesco was next with a net of five new pharmacies.

Over 900 newly-qualified pharmacists were also added to the Register in July.

Asda chief executive fails to impress MP

Asda's chief executive, Archie Norman, failed to persuade an MP over his company's intentions on Resale Price Maintenance.

John Gunnell, Labour MP for Morley and South Leeds, met Mr Norman last week on the same day that the MP was to visit Janet Ward's pharmacy in Wakefield.

Mr Gunnell told Mrs Ward that he challenged Mr Norman about what the elderly would do if there was no local pharmacy service. Mr Norman answered that Asda already provides transport.

Mrs Ward was photographed advising Mr Gunnell, who wanted to buy some medicine.

Listening ear stress scheme

About 40 pharmacists have sought advice from the Royal Pharmaceutical Society's Listening Friends stress help scheme.

Those assisted so far – in complete confidence – include a proprietor worried about a locum's dispensing error and pharmacists with financial concerns over remuneration. Council member Alan Nathan told *C&D*: "As far as we are aware, the pharmacists who have contacted the scheme have been satisfied with the help given. Several have expressed appreciation for being able to talk to a pharmacist, who could understand their situation and problems."

Listening Friends are trained volunteers from all branches of the profession. They can help with personal as well as work-related problems.

Pharmacists under stress are invited to telephone the 24-hour answering service on 0171 820 3387. They will be asked to leave their name, the area in which they live, a contact telephone number and a time to call. A Listening Friend will call back and maintain contact until the pharmacist feels able to cope or is referred to more specialist help.

Security shutters slammed

A pharmacist who has had his shop window smashed 20 times by vandals has hit out at a council which refused to let him put up security shutters.

Terence Mattock of Mattock's Chemist in Leicester was speaking following the latest incident at his shop, when vandals smashed windows.

"I have applied three times to Leicester City Council for roll-down security shutters, but have

been refused each time," says Mr Mattock. Instead, he has been forced to fit a metal grille which has failed to deter vandals.

Mr Mattock, who has run the shop for 36 years, adds: "We've had our windows smashed and our shop broken into 20 times in the last three years. I feel the council is betraying us in not letting me protect my shop."

"We pay a lot of taxes to protect our property and nothing

seems to be done. These grilles have cost me \$1,500 and we've not had them two months and the window has been smashed. I am not despondent, but just resigned to the fact that this will happen from time to time."

A City Council spokeswoman responds: "We don't want to have a fortress-like city, a boarded-up, shuttered, dark, uninviting city centre so we have a policy not to permit their use."



Keep up with the trends with C&D

A quarter of pharmacy managers say their businesses have little chance of remaining viable if Resale Price Maintenance is removed on over the counter medicines, according to *Chemist & Druggist's* latest quarterly **Business Trends** survey, confirming other research that suggests up to 3,000 pharmacies could face closure. Pharmacists remain pessimistic about the future for the pharmacy sector, but, perversely, more confident about prospects for their own businesses. See pp260-61 for the full results.

The quarterly business survey is sponsored by AAH Pharmaceuticals. Individual copies are available for \$30, or \$100 for a year (four reports). Contact Shelley Metcalfe on 01732 364122 ext 5703.

Primary care bill fighting for a place

Health secretary Stephen Dorrell is pushing for the inclusion of a new primary care bill in this autumn's Queen's speech, with the aim of delivering more services at a local level.

However, his aides are cautious about the chances of getting the bill into the Queen's speech, since the Government is already committed to major legislation in areas like education, and law and order.

The bill would follow on from the wide-ranging consultation carried out by health minister Gerald Malone, after which he called for a greater role in the NHS for pharmacists.

"Some of the things we talked about in our primary care paper will require legislation, and clearly pharmacy is part of that," says one aide.

Housing estate wins fight for pharmacy

A Worcester housing estate has gained its first pharmacy after a 35-year campaign by local residents and city councillors.

Until now, pharmacists have been deterred from opening because there are no surgeries nearby. But Ramesh Patel hopes to build up other professional services at his new pharmacy in Rinkwood. He intends to focus on OTC medicines, as the nearest pharmacies are over two miles away. He runs a prescription collection and delivery service and hopes to introduce asthma counselling, diabetes testing and blood pressure monitoring.

He has had a good response from local people, especially the mayor, Les Thomas, who has urged residents to use the pharmacy. Mr Thomas was quoted in *Worcester & Hereford Evening News* as saying: "I've been fighting for this for 35 years. Everyone who has looked at the area with a view to starting a chemist shop hasn't bothered. But now Mr Patel has grabbed the bull by the horns and it's up to us to support him."

Steroid guide published

A guide to anabolic-androgenic steroids and their use and abuse has been produced for health-care professionals.

The booklet has been written by pharmacist Dr Rod Tucker, a director of Freelance Needle Exchange. It looks at steroid types, mode of action, adverse effects and how steroids are used by athletes and body builders.

Dr Tucker says that many pharmacists involved in needle

exchange schemes are beginning to see more anabolic steroid users. They often request the large bore green (23G) or blue (21G) needles, which are used for injecting into the muscle.

Copies of the booklet can be obtained by sending a cheque for \$3.50, made payable to Rod Tucker, to Freelance Needle Exchange, c/o Cottingham's Chemist, 342 Wellington Street, Grimsby, NE Lines, DN32 7JR.

Fire destroys N Yorkshire family business

A North Yorkshire pharmacist is struggling to get his business back together after a fire destroyed his stockrooms, attic and roof.

Flames were shooting through the roof only minutes after a strip-light started a blaze at Goodall's Pharmacy in Kirkby-moorside. The shop was full of customers but no one was hurt.

It was an unfortunate case of history repeating itself. George Goodall believes an earlier phar-

macy on the site was destroyed by fire in the early 1820s. That business probably had its origins as a retail outlet for herbs grown at a nearby monastery in the 13th Century.

The present pharmacy dates back to 1823 and has been in the Goodall family since 1945. Mr Goodall had been careful to conserve the older parts of the business, which included a wattle and daub wall. Now he is having to cope with water damage.

"Fortunately most of the heat went upwards so there is very little damage from smoke," he told C&D. He managed to re-open the shop after three to four days, helped by customers and neighbours. His biggest moans are the lack of guidance from his insurers on how to comply with building safety regulations after a blaze and the fact that Yorkshire Water could not supply the fire brigade with water locally - it had to come from neighbouring towns.

Group seeks consumer help

A group of pharmacists and other health professionals is hoping to involve the Consumers' Association in the debate about medicines sales protocols.

The Group for the Advancement of Pharmacy Practice this week sent a discussion document, 'Victims of protocol culture?', to a sample of 2,000 practising community pharmacists and asked them to complete a questionnaire.

The document argues that protocols have been wrongly regarded as a binding set of rules,

rather than guidelines which pharmacists should use with their own professional discretion. Over-zealous questioning of customers might eventually drive them elsewhere, the Group warns.

GAPP member Michael Line, who manages an independent pharmacy in Woking, told *C&D* that if there was a good response to the document the Group would seek a meeting with the Consumers' Association to explain what pharmacists were trying to achieve when selling OTC

medicines and to discuss ways of working together. Another possibility was to organise meetings to help pharmacists on a local basis.

Sponsored by J&J MSD Consumer Pharmaceuticals, GAPP originated from discussions about problems with selling medicines that had switched from POM to P, particularly H₂ antagonists. The group now comprises six pharmacists, a GP and a nurse.

Results of the survey will be available next month.

Scottish stats

Chemist contractors in Scotland dispensed 4,542,026 prescriptions in May at a gross cost of £43,465,761. The average ingredient cost was 810.8p and the net total 902.8p (excluding stock orders).

Read Codes

The National Audit Office is expected to announce later this month an investigation into the multi-million pound NHS Read Codes computer project. Described by a senior Welsh Office civil servant as "in danger of collapse", the project has been the subject of increasing concern within the health service.

Pilot project grants

The NHS Executive is making \$750,000 available for pilot projects on repeat/instalment dispensing, patient compliance and pharmaceutical care for selected patient groups such as those with asthma and diabetes.

The Executive is inviting bids from health authorities which will have to show that a range of community pharmacists can participate in the projects on an equal footing. The repeat dispensing projects aim to test whether repeat or instalment dispensing reduces spending on prescribed medicines, benefits patients and enables pharmacists to add value to the NHS. The compliance projects aim to find out if pharmacists can identify patients who need additional support in taking their medicines correctly.

The Pharmaceutical Services Negotiating Committee wrote to LPCs last month asking them to submit proposals for repeat prescribing projects.

Apply for 1997's agriculture and vet course

Applications are currently being sought from pharmacists and pre-registration graduates for places on the Royal Pharmaceutical Society's 1997 diploma course in agricultural and veterinary pharmacy.

The one-year course includes two residential periods, each of one week, at Aston University, Birmingham. The rest of the work entails private study and a written project. In addition, students are required to under-

take a period of 30 days of practical experience.

The course costs \$1,075 for those on the British Register (\$1,575 for others). This includes the cost of the residential courses. Fees can be paid in two instalments, on enrolment and before March 1.

Application forms are available from the RPSGB, Lambeth High Street, London SE1 7JN. The closing date for applications is November 30.

Healthwise targets start of school term

The theme of next month's television health advisory service, 'Healthwise', is 'Back to school'.

Health topics to be covered by the service in September, carried on p559 of ITV and Channel 4's Teletext, are as follows for the weeks commencing:

● September 2 – verrucas, asthma, whooping cough, cuts and grazes

● September 9 – Migraine Awareness Week, meningitis, school diet, eczema and ear infections

● September 16 – ringworm, cold sores, vitamins for children and chicken pox

● September 23 – Dental Week, gum disease, halitosis, flossing and toothache.

Boots' campaign

Boots the Chemists is running a National Drug Awareness Week from August 25-31. All the pharmacies will be offering a 24-page drugs information leaflet, produced in association with the Health Education Authority and warning about the dangers of the most commonly used illegal drugs.

Update error

The CPP-accredited feature on cannabis in last week's Pharmacy Update was module 25, not 24. The multiple choice question paper for the August Update modules will be carried in the September 14 issue of *C&D*.

Fundholding

Latest figures from the DoH suggest that the number of fundholding GPs is growing. If all the applications from April 1977 proceed, a further 3 million patients and 58 per cent of the population will be covered by fundholders.

Tesco accused of leafletting to test 'neighbourhood' ruling

Supermarket chain Tesco has been accused of leafletting customers to gather support for a pharmacy contract application for its Salisbury store. This follows a recent High Court ruling on what constitutes a 'neighbourhood' (*C&D* June 1).

The store has made leaflets available to customers asking them to write to the Wiltshire Health Authority, urging it to consider granting an NHS dispensing contract for the outlet. The leaflets are now understood to have been withdrawn.

The store has twice had a contract application refused on appeal. It is situated on a semi-industrial estate about a mile from the centre of Salisbury. There are other shops in the area.

Penny Beck of Tesco's pharmacy office admits that there were leaflets in the store, but says they were not being handed out. She adds that claims that a petition was being organised were false.

Tesco's superintendent pharmacist, Mike Rudin, said at the beginning of July that he was keen to see where the limits of definition of neighbourhood are drawn (*C&D* July 6, p14).

Pharmacist Sultan Dajani from Durrington, ten miles away, says he has been interviewed on the radio and by the local press over the issue. He is calling for a public meeting to be held to highlight what will happen to local communities if the contract is granted to the store.

Tesco claims its first-ever health screening initiative, offering consumers the chance to test for glucose in the urine, proved to be a major success. The initiative with Bayer took place in all Tesco's 140 pharmacies in February and was repeated during National Diabetes Week (June 9-16).

During the initiative, over 100,000 urine testing strips were handed out to customers following discussion with the pharmacist. The British Diabetic Association reported around 40 calls as a result of the BDA Careline number being included on the



leaflet handed out to customers with the test. The leaflet also featured a tear-off strip inviting customers who had previously been diagnosed by their GP to write in for free information on the condition; 170 requests have been received to date.

George Romanes



Experienced staff have been overlooked

I am pleased that the chaos of organising accredited training schemes for medicine counter assistants is at last resolving itself, with the announcement that the College of Pharmacy Practice, having approved ten training courses, will be issuing certificates to all successful participants.

The excellent Miller Freeman Cambridge Counterpart course is deservedly one of those accredited. My girls are so delighted that they are to receive a CPP certificate for successfully completing the course that they have already earmarked display space on the wall behind the medicines counter. However, in all this euphoria one group seems to have been subordinated, if not ignored.

Experienced counter assistants have had that experience recognised by being allowed to take a separate exam set by the Royal Pharmaceutical Society. In January, Dotty passed with flying colours. But what has she now to show for that success and years of faithful service in my pharmacy?

So far, nothing other than a third-party notification to me that she passed. Not even a personal letter of congratulations, let alone a proper certificate to proudly display alongside the CPP certificates gained by my other girls.

The RPSGB has now

Topical Reflections

belatedly said that a small certificate will be issued to those assistants who pass the examination, but to me that is still not good enough.

Dotty and thousands like her deserve the same recognition as their counterparts, and they should now be issued with a proper certificate from the Society recognising their achievement, and an apology for the insult in not issuing it earlier!

Time to cash in on bank charges

I have always been intrigued at the reasoning behind 'cash-back' facilities available at supermarkets for customers who pay by debit card. Naively, I thought it was merely in the interest of good customer relations, but recently, after my annual chat with the bank manager, I discovered that there is method in this madness.

Customer charters have meant greater disclosure of information, and in the case of the banks this has been quite a revelation. I now know how they arrive at their charges and, contrary to expected logic, I am charged more to pay in cash than I am to have debit card transactions directly credited.

Whether the credit is £5 or £100, I am charged a flat rate 25p per transaction, but for cash I am charged on a percentage basis and it is costing me a lot to hand over my money at their till!

The answer, then, is simple. I, too, will now offer 'cash-back' facilities and I am sure they will be very popular. My bank charges should fall, the

bank's cash machine will be less overworked, and the daily carriage of cash to the bank should become less of a risk.

I know that eventually I will be summoned back to the cupboard for a review of charges, but it is the bank which should thank me. Properly managed, they need never handle money again!

A little disingenuous, perhaps ...

Johnson & Johnson seems to want to have its cake and eat it. Having successfully launched Nizoral shampoo as a licensed Pharmacy treatment for dandruff through its joint OTC venture, J&J MSD, its Neutrogena subsidiary is currently launching Neutrogena anti-dandruff shampoo as a non-licensed cosmetic by the simple expedient of changing the concentration of ketoconazole from the 2 per cent present in Nizoral to 1 per cent in the Neutrogena product.

The company says this dramatic change is legally acceptable and that it wishes to compete with the less effective alternatives already present in the cosmetic market.

But if 2 per cent is the licensed optimum concentration necessary for treatment, then surely 1 per cent will not be so effective?

Or is that of little concern when there is a vast cosmetic market out there just waiting for the launch of a 'disguised' P product, available for self-service sale in every supermarket and garage forecourt in the country?

● **Qualified** In 1978 after graduating from Robert Gordons University and completing his pre-registration with Boots the Chemists in Berwick-upon-Tweed in Northumberland.

● **Career** After a further few months at Berwick, George moved to Motherwell Boots and then, in 1981, to Edinburgh to manage A&H Todd. In 1982, he returned to his home town of Duns to run his own shop, GLM Romanes, which came on the market at the "perfect time". A year ago, he bought a second outlet in the little village of Greenlaw, just outside Duns.

● **Projects** Currently part of the Health Services Research Project headed by Dr Sue Ambler of the Royal Pharmaceutical Society. Also involved in a project on prescription intervention; an asthma management scheme with a local practice; and a Glaxo initiative on managing migraine.

● **Committees** Current vice chairman of the Scottish Pharmaceutical General Council; past chairman of the Borders Branch of the RPSGB and currently its public relations officer; area pharmaceutical committee member; vice chairman of the chamber of commerce (after six years as its chairman); trustee of a local youth club.

● **Interests** Golf, photography, swimming, learning about computers with his son, cars, attending wine-tasting clubs ... "That's about all I get time for."

● **Outlook on life** "Ever hopeful that things are going to get better, but a realist at heart."

● **Pharmacy philosophy** "We must do our best to retain Resale Price Maintenance. Medicines are for pharmacists and it is for pharmacists to guide the public wisely through the maze. A radical rethink in our remuneration structure is needed. We need a strong local pharmacy network even in quiet rural areas - they deserve the best, not a dispensing doctor."

SCRIPTspecials

Timoptol-LA: new once a day gel formulation

Merck Sharp & Dohme has launched Timoptol-LA, a once daily formulation of timolol, in a transparent ophthalmic gel-forming solution.

Timoptol-LA is indicated for the treatment and management of patients with chronic open angle glaucoma, secondary glaucoma and ocular hypertension. It comes in two strengths: 0.25 per cent w/v solution, containing 2.5mg timolol in 1ml; and 0.5 per cent w/v solution, containing 5mg timolol in 1ml.

As a long-acting formulation – one drop provides 24-hour control of intraocular pressure (IOP) – it is considered to be particularly beneficial to patients who find compliance with multiple doses a problem. IOP control and tolerability are comparable to twice daily Timoptol.

The dose is one drop 0.25 per

cent solution in each affected eye once a day. If clinical response is not adequate, patients can be moved up to the 0.5 per cent solution.

Patients switching from Timoptol should discontinue treatment after a full day of therapy and should start treatment with the same concentration of Timoptol-LA the following day. When switching from another topical beta-blocking agent, treatment should be discontinued as before and patients started on the lower-strength Timoptol-LA, moving onto the 0.5 per cent strength if necessary.

When transferring from a single anti-glaucoma agent other than topical beta-blockers, the agent should be continued on day one, adding one drop of 0.25 per cent Timoptol-LA once a day. The agent should be dropped the

next day, while continuing with the Timoptol-LA, using the higher strength if necessary.

Timoptol-LA may be used with miotics, adrenaline or systemic carbonic anhydrase inhibitors. Other topical medication should be administered no less than ten minutes before Timoptol-LA.

The gel-forming solution exerts its long-acting effect by forming a clear temporary layer on contact with the eye. This consequently reduces pre-corneal drainage and increases contact time with the cornea, enhancing the absorption of timolol into the eye.

Timoptol-LA comes in a 2.5ml bottle and has a basic NHS price of \$5.18 for the 0.25 per cent strength solution and \$5.82 for the 0.5 per cent.

Merck Sharp & Dohme Ltd. Tel: 01992 467272.

Transiderm-Nitro re-size

The pack size for Transiderm-Nitro 10 (glyceryl trinitrate 10mg patches) has changed from 30 to 28 patches with immediate effect. The new basic NHS price is £19.47. The equivalent 50mg patches are also due for a pack change soon.

Ciba Pharmaceuticals. Tel: 01403 272827.

Prograf special containers

Prograf (tacrolimus) capsules 1mg (50- and 100-capsule packs) and 5mg (50-capsule packs) will be classed as a Special Container from September 1. Packs cannot be split and reimbursement will be for full packs only.

Farillon Ltd. Tel: 01708 379000.

Neoral foiled

Sandoz Pharmaceuticals has repackaged Neoral soft gelatin capsules (cyclosporin) in tamper-evident packs. Pharmacists receiving prescriptions that are not for multiples of 30 should contact the prescriber and ask for future prescriptions to be amended.

Sandoz Pharmaceuticals UK Ltd. Tel: 01132 593400.

Galen changes

Galen has discontinued Xuret tablets (metolazone 0.5mg) due to problems over availability of raw materials. Patients should be referred to their GP for reassessment. Existing stock may continue to be dispensed. From September 1, Manevac 250g granules will be replaced by the 400g packs. Orders for Manevac 250g will be filled until stocks are exhausted and will continue to be reimbursed on the NHS.

Galen Ltd. Tel: 01762 334974.

Cefizox discontinued

Glaxo Wellcome has discontinued Cefizox (ceftizoxime) following a review of its injectable cephalosporins portfolio.

Glaxo Wellcome UK Ltd. Tel: 0181 990 9000.

Tablet colour index

The Searlecare-sponsored 1996/97 MIMS Colour Index for branded tablets has just been published and is available from:

Karen Tait, Searle, Lane End Road, High Wycombe, Buckinghamshire HP12 4HL.

Humatrope cartridge and pen launched

Humatrope (somatropin) cartridges and Humatro-Pen II will be introduced by Lilly in September to complement the company's existing vial format.

The cartridges are more concentrated than the vials and come in 18iu, 36iu and 72iu. Depending on dosage, they can last for up to three weeks following reconstitution, if stored in the fridge.

The pen, which is supplied free of charge with 29 needles, has a digital display unit which can be programmed to give doses from 0.25iu to 15iu per injection.

The 1iu and 16iu vials will continue to be supplied for those who prefer using a syringe.

Lilly is also providing adult and paediatric starter kits containing the pen, needles, swabs and information on use. Pens can be supplied free of charge via the doctor. There is also a training pack for healthcare professionals.

Humatrope cartridges come in single packs with diluent. Basic NHS prices are 18iu cartridge, \$137.25; 36iu cartridge, \$274.50; and \$549 for the 72iu.

Lilly Industries. Tel: 01256 315000.

Epivir joins fight against HIV

Epivir (lamivudine, 3TC) is the latest nucleoside analogue from Glaxo Wellcome, which is set to join the company's already established Retrovir (zidovudine, AZT) in the fight against HIV.

Lamivudine is licensed for combination therapy with other antiretroviral agents for the treatment of HIV-infected adults and children over the age of 12 years who show progressive immunodeficiency (CD4 count equal to or less than 500 cells/mm³).

Dual therapy with lamivudine and zidovudine has been found to reduce viral load by approximately tenfold; increase the number of CD4 cells; and produce sustained improvements in the HIV disease markers for at least 52 weeks – twice as long as experienced with zidovudine monotherapy. Lamivudine is not indicated for use as monotherapy.

The recommended dose is 150mg twice daily and should be taken without food where possible. Clearance of lamivudine is largely renal and levels are increased in patients with moderate to severe renal impairment. Doses should therefore be

adjusted accordingly. No dosage adjustment is necessary for hepatic impairment.

Safe use in pregnancy has not been established, but it should be avoided in the first trimester and during breastfeeding.

Co-administration of lamivudine with intravenous ganciclovir or foscarnet is not recommended. Patients on co-trimoxazole should be monitored and high doses avoided.

Lamivudine is unlikely to interact with drugs metabolised by CYP3A such as protease inhibitors.

Side-effects include headache, malaise, fatigue, gastro-intestinal disturbances, insomnia, cough, nasal symptoms and musculoskeletal pain.

Studies are currently in progress on AIDS progression and survival, and on combination therapy with other antiretroviral agents.

Epivir is available as 150mg tablets (60, basic NHS price \$171.30) and as 10mg/ml oral solution (240ml, \$46.63).

Glaxo Wellcome UK Ltd. Tel: 0181 990 9000.



Thursdays Plantation

PROFIT FROM OUR EXPERIENCE



£ The **worldwide brand leader** and original Tea Tree Oil company.

£ **20 years experience** of Quality Assurance, Research and Development.

£ The **widest range** of Tea Tree **products** available in the **UK**.

£ A potent antifungal & antibacterial range offering unrivalled **value for money**.

£ Thursdays Plantation is the **No.1** requested **Tea Tree Oil** brand.

£ Heavily promoted with an annual above the line advertising budget of **£150,000** in the **National Daily Press** and leading **Consumer Magazines**.



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TEA TREE OIL COMPANY

HEALTH IMPORTS

York House, York Street, Bradford,
W. Yorkshire. ☎ 01274 488511.

COUNTERpoints

Emotional rescue package

Bioforce is introducing Emergency Essence (15ml, £2.25 and 30ml, £3.99), a new flower-based formulation to help in the reduction of anxiety and stress.

It is formulated to help maintain stability in mood and mind during times of emotional upset.

Emergency Essence is suitable for adults and children. It contains the tinctures of the flowers of chamomile, lavender, red clover, purple coneflower, self heal and yarrow in a grape alcohol base.

Bioforce UK Ltd.
Tel: 01563 851177.

Complete kit for verrucas

Typharm is introducing its new Veracur gel kit to pharmacies.

The kit (\$3.40) contains a 15g tube of Veracur gel, ten waterproof plasters and an emery board. It is a GSL product.

The active ingredient in Veracur gel is formaldehyde, which acts against the verruca virus, causing the verruca to harden so that it can be removed by abrasion.

The launch will be promoted in the national press, on regional radio

stations and on Central television from September 2.

The gel contains no acid ingredients and is

suitable for diabetics and patients with poor circulation.

Typharm Ltd.
Tel: 01202 666626.



Toepedo ads aimed at nationals

A new advertising campaign for Toepedo is being run on the sports pages of national daily and Sunday newspapers.

The full-colour advertisements are appearing from next

month and form part of a \$2.1 million advertising spend on the athlete's foot treatment. Cinema advertising will continue throughout the year.

DDD Ltd.
Tel: 01923 229251.

Panadol trumpets its message on TV

The latest television advertisement for analgesic Panadol focuses again on the adult elephant and its calf theme.

Smithkline Beecham is investing £1 million in its campaign, which consists of 30- and 10-second

advertisements.

The elephants are used as a metaphor for Panadol, representing strength and gentleness and its position as the pain-reliever that is 'strong on pain, yet gentle on you'.

Smithkline Beecham Pharmaceuticals.
Tel: 01707 325111.



Easy to swallow micro supplements

Coenzyme Q10, with vitamin E, and with vitamin C are two new additions to the Cantassium range of easy to swallow micro supplements from Larkhall Green Farm.

The range is to be promoted in-store and backed by a £500,000 advertising spend over two months from September.

Cantassium Micro Coenzyme Q10 (60 tablets,

£6.95) is combined with vitamin E to enhance the protective antioxidant qualities of the nutrient.

Cantassium Micro Vitamin C has been launched with the approaching cold and flu season in mind. Each Cantassium Micro Vitamin C (90 tablets, £2.95) contains 100 per cent of the Government RDA.

Larkhall Green Farm.
Tel: 0181 874 1130.

Quids in with Vantage's late summer promotions

AAH Pharmaceuticals is offering promotions on its Vantage brand from August 26 to September 29. They include discounts on all six Naturewise herbal remedies (Pain, Nuwoman, Waterloss,

Nustrength, Sleepaid and Stress tablets). The discounts are 12.5 per cent on any-nix orders of five single units or more, and 15 per cent on eight single any-nix units or more.

In addition, Vantage

Hot lemon first for pharmacy

Pharmacists now have their own hot lemon flu drink to sell with the launch of Benlyn Four Flu Hot Drink.

Building on the brand success of Benlyn Four Flu tablets and liquid, Warner-Lambert Consumer Healthcare is extending its range.

Grocery leads on the hot lemon drink sales front, but W-L sees the Pharmacy-only hot drink as a way of bringing sales back into the pharmacy.

The new line is being supported throughout the winter with £1.9 million of national television ads.

W-L has created a new counter display unit in the shape of a bright yellow mug and giant cartons for window display. Shelf-edgers for the GSL hot lemon drinks section will direct the customer to ask for Benlyn.

Each sachet contains paracetamol 1,000mg, diphenhydramine hydrochloride 25mg and phenylephrine hydrochloride 12mg. Packets of five sachets will retail at £2.35 and ten at £3.99.

Warner-Lambert Consumer Healthcare.
Tel: 01703 641400.

Night Time Sleep Aid has a special promotional trade price of \$4.14.

A clearance offer of 'five for the price of four' applies to the 1.7-litre Vantage hot water bottle. **AAH Pharmaceuticals Ltd.**
Tel: 01928 717070.

Autumnal incentives available from Mentholatum

Mentholatum is offering pharmacists an autumn bonus as an incentive to stock up on winter cold and flu remedies. Discounted prices and a free, limited edition mug with every transfer order – and no minimum order requirement – are available from Jenks' representatives or

directly on 01494 442446.

Mentholatum is spending £3.5 million on promoting its products this year. An extensive promotional campaign includes consumer advertising, direct marketing, PR and trade support.

The Mentholatum Co Ltd.
Tel: 01355 848484.



Move it and win!

Stafford-Miller is launching a trade competition to promote its Sensodyne Gel.

The 'Move the Gel and Win' contest offers pharmacy assistants the chance to win a weekend break at a health farm, worth £400, or one of 50 runner-up prizes.

To be entered into a prize draw pharmacy assistants must sell 12 tubes of Sensodyne Gel in either 45ml or 75ml. Competition details are available from the company's representatives. **Stafford-Miller Ltd.** Tel: 01707 331001.

Special FX on TV

Wilkinson Sword's FX Performer (five blades, \$3.99 and ten, \$7.49) is back on TV screens from September, with a month-long, \$2.3 million campaign.

The 20-second advert features the 'I feel good' commercial and presents the FX Performer as the latest breakthrough in wet shaving and the first to



have flexible twin blades. The ad also features the blade's 'Soft Skin Guard' and

lubricating strip, which contains vitamin E, appealing to men with sensitive skin needs. **Wilkinson Sword Ltd.** Tel: 01670 713421.

Brylcreem - just for men

Sara Lee is spending £3.6 million on a national television and press advertising campaign for its Brylcreem 'Strictly for Men' hair care range from September 2.

The advertisements aim to contrast the old and new Brylcreem generations and to capitalise on its heritage.

The TV campaign will run initially on ITV/Channel 4 and then on satellite TV until January. Aimed at peak viewing times for 16-34-year-old men, the advertising is expected to reach 85 per cent of the Brylcreem target audience.

Press advertising in October and November will target men's publications and include a Brylcreem tear-off sample sachet.

Men spend £156m on hair care each year, but only £20m on male specific brands. **Sara Lee UK Ltd.** Tel: 01753 523971.

Sporting dreams come true with Fuji

Fujifilm is giving away ten pairs of tickets to UK sports events in a free to enter autumn competition running from September 9.

To win, customers must buy a special pack of Sporting Dream Fujicolor Super G Plus colour print film. If theirs is one of the top ten prize packs, they and a partner will be able

to attend any UK sports event of their choice.

Second and third prizes include sports wear and every non-winning pack includes \$0.50 off their next Fujicolor Super G Plus film.

The promotion will be available on all 'three for two' triple and single packs. **Fuji Photo Film (UK) Ltd.** Tel: 0171 586 5900.

'For the Crest of your life'

Procter & Gamble is investing £2 million in Crest Complete, its 2 in 1 toothpaste.

A new advertising campaign to break on September 1 will coincide with the brand's launch into cartons.

The advertisement will run for five months on national television and

ten months on satellite. A 'claymation' figure dressed in pyjamas and brushing his teeth is used to promote the core Crest values of helping the whole family to have strong teeth 'for the Crest of their lives'.

Procter & Gamble Health & Beauty Care Ltd. Tel: 01932 896000.

Philishave's guaranteed 'money back' offer

A cash-back offer will run on all Philishave shavers costing £40 and over, including the Reflex Action models, from September 14 to November 2.

The Philips' promotion offers varying levels of cash-back, ranging from £20 on its four new models, each costing over £120, to £5 on all Philishave models costing £40 and over, £10 on all models costing £50 and over and £15 on models in the £90 to £120 band. All claims must be received by November 16.

The autumn promotion will be supported by a national TV campaign prior to Christmas, national newspaper advertising and point of sale material.

● The value of the men's shaver market is up by nearly 4 per cent

year on year to the end of May at almost £56 million, and Philishave has a value share of over 51 per cent, according to Adrian Fleetwood, Philishave marketing manager). **Philips Home Appliances.** Tel: 0181 689 2166.

Imodium sells

Imodium

Can stop diarrhoea with one dose



ANTI-DIARRHOEAL CAPSULES



Tea Tree Oil range extended

Thursday Plantation is extending its range of tea tree oil products and supporting it with a £150,000 ad campaign.

The range is presented in new packaging and includes: Tea Tree Oil Ointment (£3.95); Vegetable Soap (£1.75); Anti-Dandruff Shampoo (£3.95); Skin wash (£3.95); Foot Spray (£3.45); Foot Powder (£4.95); and Aluminium-free, Roll-on Deodorant (£3.75). New pack sizes have also been introduced into existing lines.

Health Imports Ltd.
Tel: 01274 487662.

Dark & Lovely – make no mistake

'No Mistake' Dark & Lovely is a new Afro hair relaxer from Carson Products.

Designed for home use and carrying the 'No Mistake' guarantee, the relaxer (boxed kit, \$3.99) is formulated to help straighten Afro hair without scalp irritation or hair damage.

The improved formula offers a gentler relaxing process with deep conditioning and claims to give "guaranteed results every time".

Dooa Cosmetics.
Tel: 0171 978 1771.



ON TV NEXT WEEK

Andrews: All areas

Canesten Combi: All areas

Centrum: All areas

Just for Men: All areas

Mum Botanicals: All areas, except CTV

Nicotinell gum (trial pack): STV, B, G, Y, HTV, LWT, TT, C4

Nivea Visage: All areas

Oil of Ulay: G, C

Oxy Sensitive: All areas

Panadol: All areas

Pantene: All areas, except GMTV

Predictor: Satellite

Seabond: Y, TT

Sensodyne toothpaste: All areas, including satellite

Settlers Mint & Fruit range: All areas, including satellite

Soft & Gentle 'Girls Talk' anti-perspirant: All areas

The Wrigley Company/Sugar Free Brands: All areas

Vagisil Creme: GTV, STV

GTV Grampian, B Border, BSKyB British Sky Broadcasting, C Central, CTV Channel Islands, LWT London Weekend, C4 Channel 4, U Ulster, G Granada, A Anglia, CAR Carlton, GMTV Breakfast Television, STV Scotland (central), Y Yorkshire, HTV Wales & West, M Meridian, TT Tyne Tees, W Westcountry

Miners back on the block

Miners International has re-launched its block mascara (black, brown and navy, \$2.99), supported by new display material.

A display kit is supplied with every block mascara merchandising unit. The unit consists of a counter show card and a 12 x 16in window poster with the wording 'It's



back – Miners Original Block Mascara'.
Miners International Ltd.
Tel: 01264 350379.

It's true – Rimmel offers lips longer staying power

Rimmel International is launching Sensiq by Pierre Robert Stay True lip colour and lip liner from October.

New Stay True lip colour (six shades, £4.49) gives lips a demi-matte colour, and contains film-forming polymers to

ensure it lasts for up to six hours, according to the manufacturer. The formulation includes vitamin E and avocado oil to moisture and condition lips. It is eosin- and fragrance-free and contains a UVB sunscreen.

Stay True lip liner (four shades, £2.95) is a retractable liner that is designed to give a precise application of colour to the lips. The formulation has added moisturisers.

Rimmel International Ltd.
Tel: 01233 625076.

Revitalift eyes have it ...

L'Oréal Plenitude is introducing new Revitalift Eyes (15ml, £7.99) anti-wrinkle and firming cream into its Revitalift range from September.

Designed to control the loss of elasticity and reduce visibility of lines, its key ingredients are:

- Par-Elastyl, a vegetable protein which helps improve the skin's firmness and elasticity
- Retinol A, which produces vitamin A and helps to accelerate skin cell renewal
- UVB filter, which provides protection against sun damage.

Revitalift Eyes has a fragrance-free formulation and is targeted at 40-45-year-old women.

L'Oréal.
Tel: 0171 937 5454.

RANBAXY

Look out for products bearing the big R

Lever move

The marketing of personal wash brands Dove, Lux, Shield, Knight's Castile and Lifebuoy is to move from Lever Brothers to Elida Fabergé from January 1.

Lever Brothers Ltd.
Tel: 0181 541 8200.

Air Miles

Tudor Photographic is introducing its Air Miles promotion into the professional sector. A special Air Miles bonus will be awarded to new travel-minded professional lab owners who purchase Agfa paper before the end of the year.

Tudor Photographic Group Ltd.
Tel: 0181 202 0811.

Hear this

Shire Pharmaceuticals is announcing a change of distributor for Midrid OTC, its oral analgesic treatment. From September 1, distribution will move from Rhone-Poulenc Rorer back to Shire Pharmaceuticals. All future orders for either Midrid 15-capsule pack or 100-capsule dispensing pack should be made direct to the company.

Shire Pharmaceuticals Ltd.
Tel: 01264 333455.

Twist and pour

A new easy to use sprinkle top has been designed to make Hermesetas Gold Granulated Sweetener easier to pour and sprinkle. The sweetener is an aspartame/-acesulfame-based product and is also available in tablet packs.

Jenks Group.
Tel: 01494 442446.

Cuticura is back

Keyline Brands is once again stocking Cuticura Medicated Ointment. Formulated to help soothe and protect sore, tender skin, the ointment contains eight ingredients to help relieve dryness, chapping and irritated skin.

Keyline Brands Ltd.
Tel: 0181 893 5333.

Entertaining baby with Bambino

Mam UK has added two new products to its Bambino range of baby accessories.

The Bambino Fun Rattle (\$1.99) comes in a choice of primary colours and is designed to stimulate and entertain babies from birth.

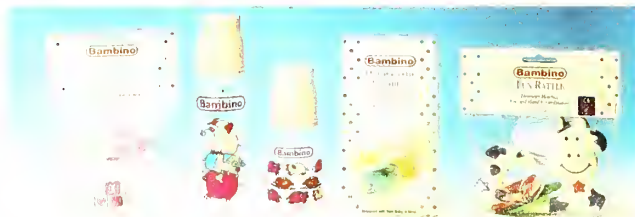
The Bambino Training Cup (\$1.69) holds 6oz of liquid, is clear in colour and has a screw-top lid in a choice of colours.

Changes to the existing range include: Bambino bottles available in two sizes (125ml, \$1.55 and 250ml, \$1.69), with silicone teats in a choice of six colours and designs; and Bambino Soothers (pair,

\$1.59), available in a choice of colours, presented on a blister back.

The Bambino range is available in outlets of 12 (24 for soothers).

Mam (UK) Ltd.
Tel: 0121 326 6992.



Extended play for Unipath's Clearblue One Step

Two new radio commercials to promote the home pregnancy test Clearblue One Step will be on air from September 1.

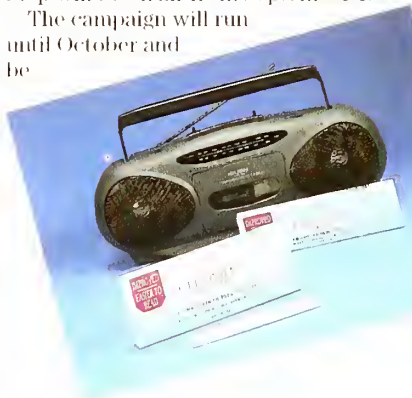
The campaign will run until October and be

broadcast in key regions, including London, Manchester, Liverpool, Birmingham, Leeds, Bristol and Glasgow.

Unipath's brand manager, Lynn Hough, says: "This increase in coverage means that over 65 per cent of women aged 16-39 will hear one of the ads at least nine times each."

Unipath's investment for radio advertising has reached \$400,000 and claims to be the biggest-ever spend for a home pregnancy test.

Unipath Ltd.
Tel: 01234 347161.



Tasty treats for toddlers

Cow & Gate is extending its baby feeding range with four Olvarit Toddler Desserts.

Aimed at toddlers over 12 months, the range is available in four fruit variants from October. It includes apple pie & banana custard; apple, apricot & peach crumble with custard; orange & kiwi fruit compote; and fruit salad (all 200g, £0.65).

Cow & Gate is also expanding its Olvarit Toddler main course meals (250g, £0.82), with the introduction of a new turkey and broccoli casserole variant.

Cow & Gate Ltd. Tel: 01225 768381.

Vegetarian meals on menu

Baby Organix has launched a vegetarian range of baby meals fortified with enough iron and vitamin B12 to supply 50 per cent of the recommended daily intake in a 100g serving.

At least 95 per cent of all ingredients used are grown without pesticides, fertilisers or growth hormones to strict Soil Association standards.

The launch includes 37 new varieties, 23 varieties of 'wet' meals in jars, and three pasta sauces (100g, £0.56 and 190g, £0.78).

Also in the range are nine new varieties of infant cereals and two ranges of pasta shapes.

Organix Brands plc. Tel: 0800 393511.

Three times as good to taste

Halo bars will be available from next month in new packaging.

Halo Foods has announced three major changes to its Lite confectionery bar (available in honey-malt, orange and rich toffee flavours; single bar, £0.32).

A new-look pack is designed to promote the three key changes to the bar:

- new packaging giving prominence to the three key changes – real milk chocolate, 95 calories and half the fat
- decrease in calories – a decrease in the quoted calorific value from 97 calories to 95
- taste guarantee – a cash-back offer if a consumer does not agree that '95 calories never tasted so good'.

A two-month nationwide radio roadshow and sampling campaign will coincide with the launch of the new-look bar.

The Miles Group.
Tel: 01484 852411.

out faster

Imodium leaves your shelves, and puts cash in your tills, three times faster than the competition.*

*Nielsen anti diarrhoeal report May/June 1996

DIET

DILEMMAS

We are getting fatter. The Government's Health of the Nation target to reduce obesity has backfired and there are now more obese people in this country than there were ten years ago. Does this spell bad news for the slimming industry and pharmacy?

The nation is growing more and more obese – at such a rate that it may overtake the US in the world heavy-weight stakes.

For those who are overweight there is a welter of diet aids on the market, each one having a varying degree of success. Artificial sweeteners, on the other hand, are a proven method, since reducing sugar from the diet will often help towards slimming.

However, we are now being told by health and fitness experts that exercise is more effective in long-term weight loss than modifying our diet. With such contradictory information around, pharmacists could be forgiven for wondering whether they can justify stocking slimming aids at all.

Appetite control

The secret to Aydslim's 40 years' success is that it is not a crash diet, but a simple method to help control appetite and enable the slimmer to enjoy nutritionally balanced food, believes Aydslim's marketing manager, Suzy Wynbergen.

Aydslim is meant to curb the appetite by introducing glucose into the stomach. Blood sugar levels consequently rise, making slimmers feel less hungry and more in control of their food intake, says the manufacturer.

There are three flavours presented in a fudge-like format containing 19 calories per cube. This should

appeal to "serious slimmers who enjoy a 'sweet treat' as part of their calorie-controlled diet".

In a jam

The diabetic grocery market has a role to play in the calorie-controlled dieting sector.

Government figures show that in 1993, 43 per cent of men and 30 per cent of women were overweight. This represents a target market of 15 million consumers for reduced-calorie food, says Stute, manufacturer of diabetic products.

The company, which has a 90 per cent volume share of the branded diabetic jam market, has introduced Stute Diet strawberry jam and slim cut marmalade. This is in addition to its diabetic preserve range, as a large proportion of its purchasers are not diabetic.

The diet preserves are made

with fruit sugar

only (no normal sugar or glucose is added), so that total sugar is reduced by 30 per cent. A level teaspoon of jam contains only ten calories. Stute's range of diabetic 'extra' preserves has 45 per cent less calories than normal jam.

A range of pure fruit juices for the pharmacy sector has just been launched. The first two varieties are pure orange and fresh pressed cloudy apple juice (available in 1-litre and 750ml tetra-packs, respectively).

The major grocery multiples are not supplied with these products, so any invidious price comparisons are avoided, says Stute.

To Boldex go ...

Potter's, the herbal medicines manufacturer, has recently renamed its slimming aid.



Boldex is the former 'Boldo Aid To Slimming', which has been mar-

keted since 1930 with no reported side-effects.

The product, containing boldo, bladderwrack, butternut and dandelion extracts, has seen consumer demand increase 200 per cent after recent press coverage.

Potter's says that Boldex is the only boldo product to have a known alkaloid content, with up to five times more boldo alkaloid content than other brands. The company claims that it is these flavonoids that have a liver-stimulant or cholagogic effect. Bile secretion is stimulated with a resultant effect on digestion.

Bladderwrack or *Fucus* is an iodine-containing seaweed that may have an effect in hypothyroidism. As such, Potter's says that the ingredient is used as a specific anti-obesity agent.

... or to detox

In 1990, Bioconcepts pioneered the concept of detoxification as a diet aid in the UK through the launch of Bio-Light, which has since seen a 30 per cent rise per annum.

This year, the accompanying diet sheet has been improved to increase the efficiency of the detox programme and to encourage users to eat healthily. A section on combinations with food has also been included.

SWEETIE PIE

The value of the non-sugar sweetener market has jumped from \$32 million in 1989 to \$55m last year, at the expense of the sugar industry, which has lost \$69m sales. Pharmacy and drugstores currently account for nearly 40 per cent volume of sales (1994) putting pharmacists in an important advisory role.

Sweetex product manager Averil Marczak says: "Pharmacists have traditionally sold a wide range of slimming products and Sweetex recognises the importance of the pharmacist as a means of reaching and helping those with specific dietary requirements." Sweetex has retained its position with a 29.1 per cent market share.

Canderel became the leading brand sweetener in 1993 and has held on to that position ever since. Last year, its market share increased from 34.9 per cent to 36.3 per cent. The company puts its strength down to

strong ongoing marketing support, which will continue into next year.

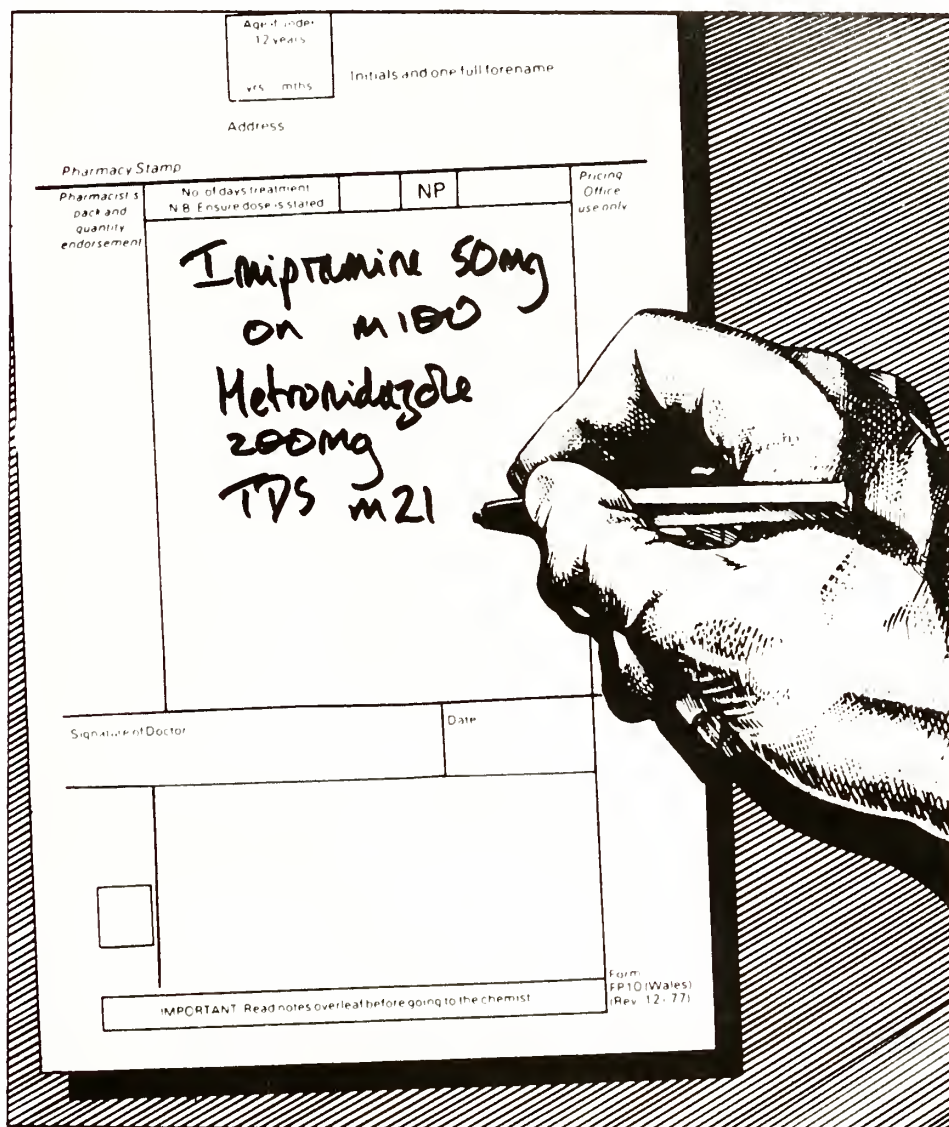
Galpharm, however, has found out that looks and outside appearances should never be underestimated.

Some years ago, Galpharm decided to repackage its saccharin range in blue screen-printed tubes, believing it would bring modernity and new interest. What it brought with it was a lack of recognition.

So in June, the packaging returned to the original and familiar green livery and the company's artificial sweeteners were relaunched as Galpharm Supasweet Saccharins incorporating its 'Minisweetener' range and the saccharin 12.5mg BP formulation.

Since then, sales have been forecast to reach \$800,000 for the year ending July, 1997, compared with \$286,000 for the same period this year.

A middle-aged man asks you whether you can give him anything stronger than paracetamol for the pain of his tooth abscess. By the way, he says, can you suggest a herbal calming tablet that will be alright to take with his antibiotic; he's under a lot of stress at work at the moment and he just wants something mild to help him through it. He's not sleeping so well, but at least his stomach is better now



Questions

- 1 What would you suggest as an analgesic?
- 2 Would you recommend a herbal calming tablet?
- 3 Do you have any comments on the antidepressant therapy?
- 4 What other question might you ask?

Answers

1 Non-steroidal anti-inflammatory drugs are effective analgesics for tooth pain, so ibuprofen or aspirin would be a good choice were it not for a possible history of gastro-intestinal problems. Enquire further into the nature of his stomach problems and possible causes, but, unless you are reassured, paracetamol is the only OTC option.

2 Any drug treatment for what appears to be anxiety is inappropriate without more detailed investigation of the underlying problem and this is best considered first by the GP. There are several possible causes: temporary stress, a manifestation of inadequately treated depression; or anxiety, associated with depression, and the unpredictable CNS effects of further medication will only complicate the problem.

3 Some people experience some stimulation with imipramine, which is less sedating than amitriptyline; if this is the case, the dose should not be taken at night. The dose is low – the BNF cites a range of maintenance doses of 50-100mg/day, but doses may need to be as high as 200mg/day.

4 As you ask about the history of stomach problems, check whether any treatment has been taken – particularly cimetidine, which inhibits the metabolism and increases blood concentrations of imipramine. (This might, for example, explain why the dose of imipramine is low and indicate the need for dose adjustment.) Whether this would be clinically significant with the occasional low doses indicated with over the counter cimetidine is uncertain.

Rennie®

The multi-dimensional pharmacist

As market leader in digestive remedies, one of the fastest-growing OTC sectors, Roche Consumer Health is in constant contact with pharmacies – from High Street multiple to local chemist.

As more people look to the pharmacist for advice, the role is becoming increasingly important. Not only are they medical consultants but they also have to manage a shop, be astute business people, be fair and be respected employers, and even become customers' confidantes. Juggling roles and wearing different hats contributes significantly to making the pharmacist indispensable, says Bob Curtis, national sales manager for RCH. Here he looks at each role a pharmacist plays.

Medical consultant: keep up to date and capitalise on trends or issues. Build up relationships with local GPs. Customers feel secure if you make reference to their doctor by name, while a GP who knows of you is more likely to refer patients. Keep notes on customer's ailments, conditions or worries plus personal or family details – such as ages of children.

Offer a private place where customers can discuss their problems or give an hour each day for telephone consulting.

Business person: watch the market and merchandise accordingly. Manage consulting time. Offer advice, but ensure time isn't wasted on one customer while another leaves empty-handed.

Capitalise on seasons and events. The obvious: holidays, Christmas and the less obvious: back to school (cod liver oil), moving house (de-stressing products). Utilise material available from manufacturers where it is appropriate and this will save you valuable consulting time.

Shop manager: create an ambience based on customer needs. Is one stop shopping needed? Are you an oasis of calm in a busy street; are you the centre for healthcare advice in your community?

What do neighbouring outlets offer and who shops there? What can you offer customers that is extra?

Stock new and different product lines or link themed products to create a holiday survival kit, for example.

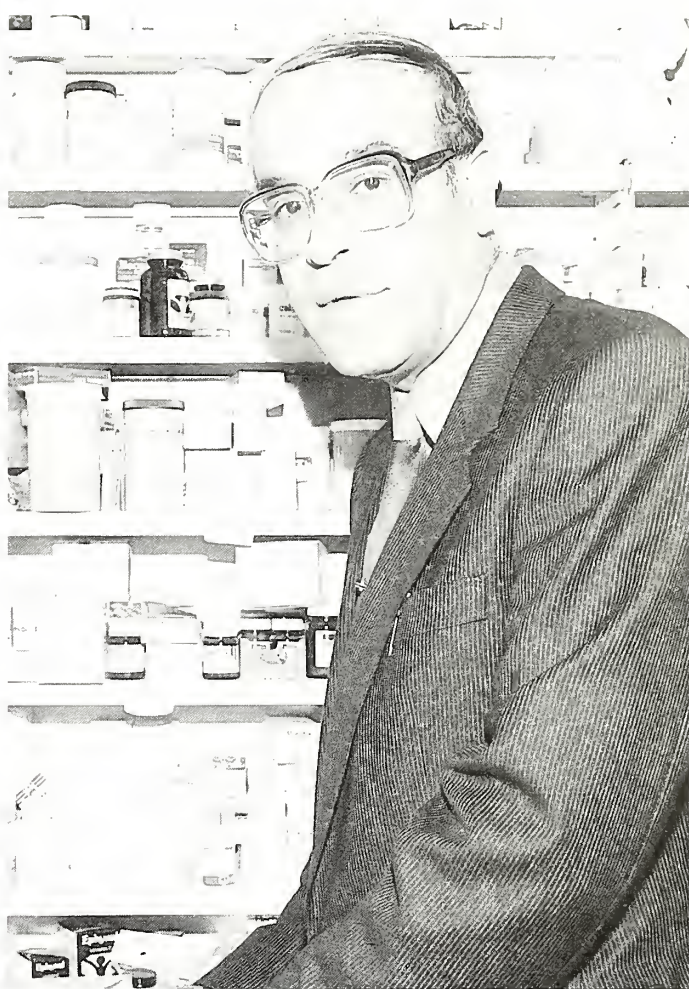
Employer: choose an assistant with complementary skills to you. It means a wider variety of customers can be helped. Consider specialisation or personal interest. Motivate and train.

Customer confidante: customer types – do they want their hand held, a confidante or just a smile? In a busy outlet it's hard to read people quickly but it could make all the difference.

Finally, get tips from other pharmacists. Visit outlets as a customer. You can learn a lot – not just from direct competitors – from larger and smaller outlets too.

Delivering an error in judgment?

Ashwin Tanna FRPharmS, a community pharmacist in Dulwich, London, questions the decision of the Royal Pharmaceutical Society's Statutory Committee in the case brought against Boots the Chemists earlier this year over its handling of prescription collection and delivery services



On January 18, by a majority of three to one, the Statutory Committee of the Royal Pharmaceutical Society found Boots the Chemists and its superintendent pharmacist guilty of misconduct in providing prescription collection and delivery services in rural areas.

The Committee found misconduct, but in its wisdom ruled that this was not serious enough to warrant taking any further action.

I sincerely believe that the Statutory Committee's decision not to take any action was ill-judged. The repercussions it could have on the profession were not carefully thought out.

Boots made a request for leave to apply for a judicial review of the majority decision within the period of three months allowed by the High Court and that leave has been granted without an oral hearing.

At present, no one knows when the application will be listed and it can take up to two and a half years or more before a case is heard by the courts.

In the meantime, the company can disregard the decision of the Statutory Committee and carry on its prescription collection and delivery services in the rural areas of Humberside and Wiltshire if it so wishes.

On April 12, after an oral hearing, a Service Committee found

Boots the Chemists in breach of its Terms of Service in connection with faxing prescriptions from its non-contract Dog Kennel Hill pharmacy to the Walworth Road branch, which does have an NHS contract. The Service Committee's decision had to be ratified by a full meeting of Merton, Sutton & Wandsworth (MSW) Health Authority.

From the pharmaceutical press, I was astounded to read that MSW HA has upheld the complaint concerning the "reasonable promptness of dispensing", yet has designated faxing of prescriptions from a non-contract pharmacy as a prescription collection and delivery service.

If this is true, then the profession is faced with yet another new twist in the saga of the faxing of prescriptions from a non-contract pharmacy, with it now being considered a prescription collection and delivery service.

Collection and delivery services cannot be allowed or designated where full pharmacy services are already available in a locality. The Society should be consulted whenever such a

scheme is proposed so that an inspector can investigate the arrangement.

The other technicality is that the point at which the prescriptions are collected and where medicines are delivered should ideally be free from association with the supply of the medicine. Moreover, the pharmacist in charge should be aware of a need for a collection and delivery service in his area and should involve the local pharmaceutical committee.

The Council certainly made an error of judgment when it declined to state explicitly that the practice of faxing prescriptions contravened the ethical standards required of its members. The decision of the Council not to oppose the faxing of prescriptions is inequitable and certainly not in

the long-term interest of the public or the profession.

The Society took a stand against Boots in relation to prescription collection and delivery services in Humberside and Wiltshire. It referred the case to the Statutory Committee, where the company has been found guilty of misconduct, yet it is not pre-

pared to take a stand against prescription faxing.

When it comes to fundamental issues like 'professional misconduct', we are told to leave the decision as to whether the issue is pursued to the Council. The result? Council members vote "as their consciences guide them" – regardless of what the membership might want in the long-term interest of the profession and the public.

In response to a recent letter in the pharmaceutical press, the Society's secretary and registrar stated categorically that the Branch Representatives' Meeting (BRM) is the place where the views of members on important issues are made clear, and which the Council would take into consideration.

The irony of the situation is that, at the BRM last year, a motion put forward by the York Branch, regarding the faxing of prescriptions from a non-contract pharmacy, was passed by the meeting, yet the Council has ignored it and relied instead on the minister of health to outlaw the practice.

The Council is elected by the membership and should not dance to the tune of multiples. Council's job is to listen to all, and to kowtow to none. It must decide what is in the best interest of the public and the profession in the long-term, without fear or prejudice.

The Council is elected by the membership and should not dance to the tune of multiples

We don't work for nothing!

Was anybody else as incensed as I was when they read the new Traveller Software health information brochure?

I received the information last week. I read the labels first, and was thinking it rather good until, right at the end, came the words:

'Nivaquine 7 Split £0.49'.

How dare they presume to decide how much I might charge for splitting a pack of tablets! Who is their pricing expert? Or rather inexpert! He will bring the whole product into disrepute.

I, and the great majority of pharmacists, do not work for nothing. Yes, I would sell a complete pack of 28

Nivaquine for the list price of £1.96. The remainder could be discarded or probably taken by an accompanying person. Even if not, £1.96 is hardly a significant factor in the price of the holiday.

If I decided to sell only seven tablets from a pack of 28, do Traveller Software seriously think I, or anyone else, would repack and relabel the tablets and sell them for a quarter of the price? That would mean that we had costed our time and expertise at zero, or in fact

less than zero, as we would be left with a residue of 21 tablets which may well be unsaleable.

My accounting shows that it costs me £3.50 per five minutes to run my pharmacy. There is such a thing as selling too cheaply! 'Working' for 49p is one of them.

I am reminded of a story I was told earlier this year. A pharmacist was asked to be an expert witness by a solicitor in a court case. When asked how much he would charge, the pharmacist replied: "Half a day – £50."

There was a silence on the telephone and then the solicitor replied: "Would you make that £250. At £50 no one will think you are an expert."

Anne Haines-Nutt
Torquay

Lloyds' saga – who is the winner?

Your **Comment** (C&D July 27), like the Mergers and Monopolies Commission's report, missed the fact that quite a lot of the wholesaling undertaken by Lloyds is for its own branches. This business would obviously go to the one who wins the race.

The other point is that all the information about Lloyds'

wholesaling business customers will likewise be the property of the new owners. They will undoubtedly use it to benefit them to the maximum by targeting those potential customers which it identifies.

Since both Unichem and AAH are now direct competitors of the independent, their support for such pharmacies has become secondary to their ambition to compete with Boots in the retailing sector.

The first two factors would make any potential purchasers of the depots evaporate. However, if a syndicate of pharmacists was formed, just like when Unichem was established, with the sole purpose of supporting only independents without competing with them, then a third factor could come into operation and make it possible to buy some of the depots for next to nothing.

Personally, I feel that the MMC's report was short-sighted and inadequate. What it should have asked was that the wholesaling and the retailing arms of the new owner should be demerged in every sense of the word. This would have served the profession and the public at large much better.

Finally, independent pharmacists are not going to be the winners, as you suggest, rather those with higher turnovers who could individually flex their muscles to get better deals while the rest pay the price for it.

Jay Patel
Romford

*Mr Patel is quite right to say that much of Lloyds' wholesaling turnover comes from serving its pharmacies. The point made in the **Comment**, which Mr Patel appears to have overlooked, is that independent wholesalers could be the major winners. Competition in the wholesale sector generally benefits independent pharmacy customers, Ed.*

No-win situation?

I read with interest the article on the sale of Lloyds in C&D July 27, and the awkward preconditions imposed by Ian Lang of the DTI which face Unichem and Gehe.

Why do they not form a joint venture, with 50 per cent maximum shareholding to buy the wholesale sites? Thus no winners, no losers! Simple.

Kevin Naylor
Leeds

Three good reasons to visit EXPOPHARM'96 in Leipzig

EXPOPHARM is Europe's largest international pharmacy trade fair, with more than 400 exhibitors and over 20,000 visitors.

At EXPOPHARM you'll find new partners, products, services agents/distributors, representations, licensors. And there's a Business Centre and International Meeting Point to help you.

EXPOPHARM to be held this year in Leipzig, trading centre for over 800 years, now offering the most modern fair complex in the world.

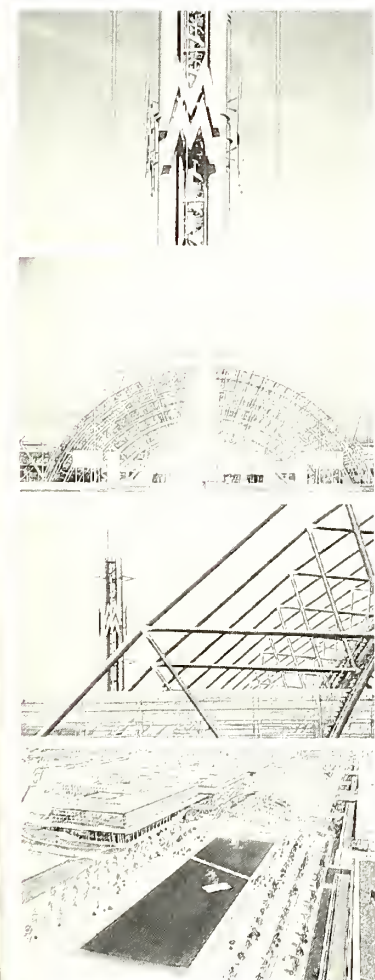
We look forward to welcoming you – 24-27 October, 1996*

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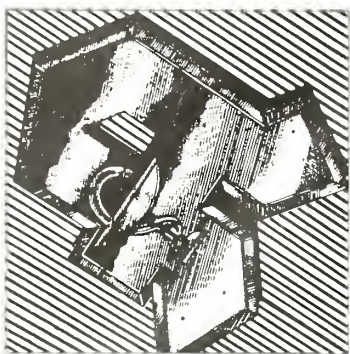
International Pharmacy Trade Fair – 24-27 October, 1996 – Leipzig, Germany



Health cuts spark strikes

Swingeing cuts in social security and health benefits have led to a wave of recent strikes and protests in Germany, as the government attempts to meet the criteria for monetary union.

More than \$3 billion savings have been proposed in the statutory health insurance budget alone. Prescription charges will rise, the contributions of the health insurers to the cost of spectacles and dentures will be abolished, holidaymakers will have to pay for travel vaccinations and further restrictions are being placed on the national institution of spa treatments.



Sick pay is also to be cut, but to sweeten the pill, no further rise in insurance contributions will be sanctioned and premiums will

actually fall next year. The health insurance schemes have been ordered to reduce their soaring administration costs – staff numbers alone rose by 22 per cent between 1985 and 1994, while the number of insured persons only increased by 2.6 per cent. Over the same period, the value of assets, such as buildings, land, cars and office equipment, increased by 64 per cent. Some of their highly-criticised activities, like cookery classes, dancing lessons, self-defence courses – all in the name of health prevention, but viewed by many as marketing ploys – are to be curtailed.

Top of the pops

From the results of recent surveys, the three-year PR campaign organised by ABDA, the umbrella organisation of German pharmacists, appears to have been highly successful in raising the public awareness of their advisory role.

Pharmacies were rated top for friendly service and competent advice above petrol stations, car repairers, travel agents, hi-fi and electronic dealers, grocery shops, furniture retailers, drugstores and department stores.

However, in another survey, pharmacists themselves were placed only seventh in public esteem behind doctors, who achieved first place again, ahead



Health education for football couch potatoes failed to score

of lawyers and priests, who tied for second place. They were followed by university professors, diplomats and businessmen, who were all rated just above pharmacists.

Recent topics covered in ABDA's campaign included one on drug abuse and another on sports medicine – just at the time of the Olympics. However, one regional chamber of pharmacists

perhaps took public health education a bit too far with its 'Fitness, football and TV' posters at the time of Euro '96. In a vain attempt to improve the health of the couch potatoes glued to the inexorable rise of the German team, viewers were urged to follow seven rules for TV watching that included "take a break from time to time and do fitness exercises, only smoke a cigarette or drink alcohol when a goal is scored or the right team wins, and choose healthy snacks to nibble while watching".

Even more Utopian were the tips from the German Society for Nutrition: eat salads or chopped raw vegetables and low-fat dips instead of crisps, and drink a fruit juice spritzer instead of lager or wine! A baker in a small German town probably had a more successful idea when he created Euro '96 novelties such as 'penalty area crusts', the '11m roll' and 'marzipan footballs'.

Processing a step too far

The goal of 'image processing' of prescriptions has proved an enormous headache for the Munich industrial conglomerate Siemens-Nixdorf.

Digitising large amounts of data required by law on German prescriptions means that Siemens-Nixdorf looks certain to foot a large bill for time penalties in not meeting a contract with two of the country's largest pricing bureaux.

In 1994, a package was agreed between the health insurance schemes and pharmacists to provide machine-printed information on scripts (C&D January 7). Pharmacists bought the quite expensive equipment, but, until recently, it seemed possible they might face penalties for not providing health insurance schemes with the legally required data.

Sympathy should be felt for Siemens-Nixdorf, which won the contracts for supplying machines capable of photographing or scanning a staggering 30 scripts per second. This is one of the largest image-processing projects to be attempted in this field – a third of the scripts eventually have to be processed by PC.

Difficulties had come to light during trials last December. The computer company had assured one of the pricing bureaux that the problems could be overcome by the deadline of the end of March. However, on March 20, Siemens admitted temporary defeat in its attempts to sort out the hard and software faults, which were eventually solved by July.

These reports come from a correspondent with acknowledgments to the German pharmaceutical press: Deutsche Apotheker Zeitung and Pharmaceutische Zeitung

Downside to technology

At their annual conference, Bavarian pharmacists denounced 'teleshopping' for drugs.

They added their dismay to that widely expressed in the German media at the appearance on the Internet of order forms for Prescription-only medicines.

Original packs of Belgian, Korean, Dutch, Brazilian, Italian and other medicines are allegedly being offered to doctors and pharmacists from 'Inhome Health Services' at prices quoted in sterling, Dutch guilders and Swiss francs.

Items arrive with an Amsterdam postmark, together with a 'Physician Information' leaflet that lists the indications in a somewhat unusual form for all the 18 offered drugs, which include hormones and psychotropics.

Deprenyl, for example, is a "sexual stimulant and anti-ageing agent", while the indications for vasopressin are given as "improvement of concentration, memory, attentiveness", with the warning that uncontrolled use can be dangerous.

You win some, you lose some

In a trial case, a German pharmacist has been cleared of the accusation that she acted illegally in the Vita Natura Diet saga (C&D June 8).

She was threatened with legal costs and fines, when, in common with another 1,000 pharmacists, she agreed – in telephone conversations – to supply the product. The pharmacist was also awarded costs, but it remains to be seen whether the case will go to appeal.

The legal processes brought by

the maker of 'Shark-fit' against the crusading pharmacist Mr Huesmann (C&D September 2, 1995; November 25, 1995; and June 8) about derogatory remarks he made about its product also grind slowly on, with a further two court judgments against him.

Uncertainty concerning the amount of damages he must pay will continue for several months until the next hearing, as does the controversy he has aroused in pharmaceutical circles concerning his activities.

Manager stole cocaine for his habit

A young pharmacist manager, who dabbled in rave drugs during his university days, stole cocaine from his dispensary and snorted it in the shop's toilet, was struck off at a disciplinary hearing earlier this week.

Dylan Thomas, 25, who recently left the family home in Coedpoeth, Wrexham, was employed by Rowlands Pharmacy of Rhosddu Road, Wrexham as its sole pharmacist and manager from May 9 last year.

He took advantage of his position to order cocaine, which he snorted on the premises and at home, as well as stealing Valium and other tranquillisers. He was sentenced to perform 150 hours community service work plus \$25 costs at Mold Magistrates Court on February 26 after pleading guilty to stealing 20g of cocaine from Rowlands and

unlawfully possessing the drug. He also asked the court to take into consideration the theft of a quantity of temazepam and Valium from the pharmacy between May 1 and November 8, 1995.

Josselyn Hill, representing the Royal Pharmaceutical Society, told its Statutory Committee that Mr Thomas brought attention to himself by ordering larger than usual amounts of cocaine, which was noticed by the company's superintendent pharmacist.

The books were checked and it was revealed that 22g of cocaine was unaccounted for. As a result, on November 8 last year, Mr Thomas was arrested and quizzed by the police.

"He volunteered the fact that he was addicted to cocaine and had been for some time, and had taken not only the outstanding amount of cocaine but some Val-

ium and temazepam. Throughout the investigation Mr Thomas denied trafficking cocaine to anybody else," said Mr Hill.

Before becoming a permanent manager, Mr Thomas had acted as a locum at other branches for six months. Nothing was taken from these premises.

Mr Thomas, who is now living in Leeds, told the Committee: "I was addicted and I obtained cocaine from other sources, other illicit street sources. I did start using drugs at university. I started off one weekend a month, increasing to most weekends at the end of my university course, mainly ecstasy and amphetamines.

"I am remorseful. I feel guilty now. At the time I was driven by an addiction that stopped me thinking. I sort of broke down my own reality."

Following his arrest, Mr Thomas fell under the wing of Mr Joe Mee of the Sick Pharmacists Scheme, who sent him to a drug dependency centre which specialises in treating addiction among medical professionals.

Mr Thomas insisted he had not taken drugs since November last year and had successfully completed a residential rehabilitation course last January.

"I have worked over the last couple of months as a locum and I have resisted temptation. I feel that it is something I have put behind me, I can see the destructiveness of it."

Committee chairman Gary Flather QC, said: "The breach of trust here is quite dreadful." It was unacceptable that the public should be put at risk by a pharmacist under the influence of drugs, he added.

Troubled pharmacist deemed unfit for Register

A pharmacist who suffered a nervous breakdown and began abusing drugs was kept off the Pharmaceutical Register at a disciplinary hearing this week.

David Haines of Grovesend, Swansea, let his business crumble around him and left his unqualified assistant to dispense drugs without any supervision.

Mr Haines, who was removed from the Register after failing to pay his 1995 professional fees, was hoping to return to pharmacy practice. He claimed his troubles were now behind him.

The Royal Pharmaceutical Society's Statutory Committee heard from Josselyn Hill, representing the Society, that Mr Haines ran a pharmacy at 89 Sterry Road, Gowerton, near Swansea, with his ex-wife. He

was a full-time manager, but by July, 1992, when she became pregnant for the second time, he could not cope.

A Society inspector visited him in December, 1993, and was "very uneasy" about his manner and contacted the local family health services authority. Those involved felt Mr Haines was suffering a psychiatric breakdown, but he refused help.

"He was violent throughout that time against various people, including his wife, and he failed to properly run the pharmacy," said Mr Hill.

In June, 1994, Mr Haines left his wife for his shop assistant, Donna Lee, and they lived in the pharmacy office for two months until moving into the flat above the shop. They have since mar-

ried and have a young child.

"Mr Haines was frequently unable, through drug-taking on his part, to run the pharmacy. Ms Lee said she dispensed methadone for addicts when he was asleep and carried out other dispensing without his supervision," said Mr Hill.

When the Society inspector, with police, visited him in October, 1994, he could not be roused, and antidepressants and tranquillisers were found in the flat.

Committee chairman Gary Flather QC said: "This is a sad case and Mr Haines certainly went through a great deal of difficulty. Mental illness is not misconduct, but ... his behaviour, in the opinion of the Committee, renders him unfit to be on the Register."

'Shoddy' pharmacist is reinstated

A Milton Keynes pharmacist, struck off for having "shoddy" premises, was reinstated on the Register by the Statutory Committee on Monday.

Jitendrakumar Chimanbhai Patel of Milton Keynes was struck off in September, 1994, after a series of irregularities at the Rainbow Pharmacy in Fishermead Boulevard, Milton Keynes.

Josselyn Hill, representing the Society, said that Mr Patel, who did not attend, had completed two of the four modules of a Luton management course and had also attended a 'return to practice' course.

"He showed his desired intention to return to the profession well equipped," said Committee chairman, Gary Flather QC.

Reprimand for involvement with unlicensed wholesaler

A Folkestone pharmacist who got involved with the unlicensed wholesaler Pierre Schaffer was reprimanded by the Royal Pharmaceutical Society's Statutory Committee this week. Jainim Patel, of Folkestone, was approached by Mr Schaffer, who offered cut-price prescription drugs distributed from the boot of his car.

Mr Patel admits he was responsible between March and October, 1993, for obtaining medicines for the purpose of retail sale or supply from an unli-

censed wholesaler. Some of the medicines were not licensed in the UK.

Mr Patel, who owns McCauley Pharmacy at 56 Canterbury Road, Folkestone, and also one at 110 Guildhall Street, stocked unlicensed Mexican Azantac and Indian Prozac.

Josselyn Hill, representing the Royal Pharmaceutical Society, told its Statutory Committee this was another in a long line of such cases. Mr Patel had bought \$3,867 worth of medication from an illicit supplier, but stressed

only \$167 worth was actually unlicensed products.

When quizzed about his dealings with Mr Schaffer, who was later arrested for unlicensed supply, Mr Patel frankly admitted: "Price was the main attraction." He also admitted knowing Mr Schaffer was unlicensed, but was persuaded to buy because he knew that others had and was convinced by the dealer he would soon win back the licence to supply.

Mr Patel told the Committee he destroyed all the Indian

Prozac after a customer refused to have anything to do with it, insisting on the UK product.

No Indian Prozac was ever dispensed to the public, insisted Mr Patel. Two-thirds of the Mexican Azantac was sold and the remainder destroyed.

The Committee agreed to reprimand Mr Patel and chairman Gary Flather QC said: "He was one of those pharmacists who we are becoming familiar with in the south east of England, and particularly Kent, who had dealings with Mr Schaffer."

The old marketing adage that a good product will practically sell itself has been true of Predictor since Chefaro UK introduced it into Britain 25 years ago. As the company prepares to celebrate its 25th birthday, **Guy L'Aimable** reflects back to its battle to win the hearts and minds of the British public

SUPREME

Launching a product is always a gamble. Having done the research, a company still cannot be certain how consumers will react to the product and, equally importantly, whether it will get the retail distribution it needs. Imagine then, trying to launch a brand when most pharmacies do not want to stock it, many doctors oppose it, consumers suspect its qualities, and the media refuses to write about it or even advertise it.

Sounds like a brand manager's nightmare? It was a reality for Chefaro UK when, 25 years ago, it sought to launch an unknown home pregnancy test, called Predictor, in the UK.

Both brand and company were new. Predictor had first been launched in the Netherlands in May, 1971. A few months later, Akzo, an Arnhem-based group specialising in chemicals, set up Chefaro UK to introduce and market the brand in the UK.

Clearing the advertising hurdle was the first priority. The ban on home pregnancy ads was a safeguard against con men and backstreet abortionists. But it was also there to protect consumers' interests, because home pregnancy tests, at that time, were notoriously inaccurate.

Chefaro UK had technical data to prove Predictor worked. But it had nothing to show that women could use the product satisfactorily at home. So the company carried out a test on 200 women, each of whom was given a sample bottle, containing either a pregnancy hormone in liquid form or just water. None of the women knew whether they had a positive or negative sample.

Chefaro asked them to take their sample home and follow Predictor's instructions. Ninety-eight per cent of the women completed the test successfully, according to Chefaro.

This result convinced the UK authorities, which duly changed the advertising rules



Another hurdle, public confidence, proved much more difficult. It was already at a low ebb thanks to Twenti-sec, the UK's first home pregnancy test. Launched in August, 1971, Twenti-sec's reliability was said to be lower than 70 per cent, and much lower than that of Predictor. In December, just after Predictor had been launched, a medical consultant who had been one of the main supporters of Twenti-sec publicly withdrew his support in the *Daily Mirror*.

Twenti-sec was virtually crushed overnight, as was the credibility of home pregnancy tests.

Medical opinion compounded the problem. Many doctors did

not like the idea of a woman finding out herself whether she was pregnant, although some doctors disagreed, arguing that it would save them time. Pharmacists, with their eyes on doctors' prescriptions, thought it better not to stock Predictor to prevent annoying the doctors.

Some pharmacists argued that women were unlikely to pay for Predictor if they could get a similar result for free on the National Health Service.

Boots the Chemists also turned down Predictor, even though the chain did not dispute the product's accuracy. Boots argued that, because women could be under stress when con-

ducting the test, they could interpret the result the wrong way, even if they had obtained the correct result.

Chefaro could not get support from the press, whose editorial and advertising departments appeared to be afraid of how women would react if they privately found out that they were pregnant.

Not surprisingly, the company admits Predictor's first five years in the UK were very tough. In 1971, only 30,000 home pregnancy tests were sold. About that time, one in five pharmacists stocked the brand.

"With very limited distribution, it was very difficult to make an impact on the market," says Caspar van Dongen, Chefaro UK's general manager.

It must have been an extremely frustrating period for the company. Chefaro knew the UK market had potential. After all, its research suggested that

With very limited distribution, it was very difficult to make an impact on the market

SURVIVOR



Caspar van Dongen (left): at the start it was difficult to make an impact with Predictor (above)

women wanted a home pregnancy test to save them time, to act as an early warning, enabling them to arrange pre-natal care, to avoid potentially-embarrassing trips to their doctors and, importantly, to be the first to know.

Chefaro's patience paid off. Its first break came from a panel of GPs, which tested Predictor among women who suspected they were pregnant and published the brand's overwhelming success in the *British Medical Journal* in 1973. A year later, Predictor was tested by the Consumer Council and was given the all-clear.

All other barriers gradually disappeared. Women's increasing sexual liberation changed their attitudes towards home pregnancy testing. It was no longer considered shocking and furtive.

Spurred by the groundswell of medical and public opinion, Boots began stocking the brand in the late 1970s. Other pharmacists soon followed suit.

Chefaro tentatively sought to advertise Predictor. This time its ads were accepted by the media. And the rest, as the saying goes, is history.

Twenty-five years on, Mr van Dongen proudly reels out Predictor's statistics. The brand is the UK's second best-selling home pregnancy test, with a 30 per cent

share of the market. Chefaro UK annually sells about 500,000 Predictors, and the brand accounts for a substantial part of the company's overall sales.

C&D's research suggests that, despite tough competition, Predictor's sales have grown annually by 30 per cent over the past two years, making it the fastest-growing brand in the market.

It is currently featuring in a nationwide television advertising campaign.

If someone comes up with something interesting and new, but risky, why not do it?

Predictor has changed over the years. Chefaro's research suggests that women take the accuracy of such tests for granted now, so the emphasis is on simplicity.

"We always thought that time was very

important," says Mr van Dongen. "Just a few minutes is good enough for women, as long as the test is simple."

Annual sales of home pregnancy tests in independent pharmacists amount to about \$7.5 million, while total retail sales of the tests are worth about \$18m.

Meanwhile, Chefaro UK's financial position reflects its success. The company's revenue is expected to reach a record level this year, up 20 per cent on that of last year.

Following a series of corporate changes over the years, Chefaro UK is now part of Chefaro International, the OTC healthcare group of Akzo Nobel.

Chefaro UK's core markets are diagnostics, medicated skin care and self-medication. Other brands in its portfolio include

Jungle Formula, an insect repellent, and Endocil. The company also distributes skin care and oral hygiene brands on behalf of French clients.

As Chefaro prepares to celebrate its 25th birthday next month, it is clearly far from complacent.

Two years ago, Mr van Dongen trimmed the company's product range because it contained far too many 'peripheral' lines, such

as contact lenses, sunglasses and Slim Fast.

"Now we're running a substantially bigger business with nearly half the product lines we had two years ago," he says.

Chefaro UK is also continually looking for new opportunities. "We'd like to be involved in a more serious way in the cough and cold market."

The company is also interested in a number of new fields, although Mr van Dongen is understandably coy about giving away exact details.

Chefaro, he says, could enter a market by acquiring a brand, and it is developing new brands, although it will not launch more than two a year.

Keeping an open mind about future possibilities and the way Chefaro approaches them is the key. Mr van Dongen believes all his employees have the opportunity to influence Chefaro's future direction. Innovation is important, he says, as long as it does not clash with Chefaro's fundamental objectives.

"If someone in the marketing department comes up with something new and interesting, something the company has not done before, and it sounds risky, but maybe interesting, why not do it?" he says.

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Dealing with sickness absence

The number of days absence from work has almost doubled over the past ten years, a problem which is particularly harmful to smaller businesses.

John Muir BCOM FIPD FICArb tackles the issue and offers advice to employers faced with making difficult decisions to deal with the situation



Absences planned in advance should not cause an employer undue problems. Work-sharing can be instituted or, if the period of absence is short, less urgent work can accumulate to be tackled as and when there are spare resources.

The real problem comes when the absences occur at short notice and are of indeterminate length. Such situations tax managerial resources to provide work cover at short notice and often at considerable extra cost. The problem can be particularly acute in smaller businesses where staffing schedules are already tight.

By far the greatest source of 'short notice' absence is due to ill health. Department of Social Security figures show absence from work exceeded half a billion days in 1991 – nearly double the annual figure of a decade ago.

Researchers can find no apparent explanation, but claim that as much as 35 per cent of lost days are stress-related. The figures show that female absenteeism has risen twice as fast as male absenteeism.

Another statistic, from the Health Education Authority, says that 21 million working days are lost each year in England due to sickness absence from chronic bronchitis, emphysema and asthma. The CBI says the overall cost of sickness absence comes to more than \$13 billion each year.

The 1991 Statutory Sick Pay Act transferred the burden of the cost of SSP from the state to individual employers. Before 1991, the employer acted as an agent in

making the payment, and could recoup most of the cost from the DSS. Now, only small employers whose NIC is less than \$20,000 a year can continue to reclaim money.

Since the abolition of doctors' certificates to cover short-term sickness, the employer has had to rely on employee self-certification for the first week of absence. This has certainly made it easier for the employee who intends to exploit the system to get away with it.

Often, the situation is left to drift, with the employer having no idea how often it has repeated itself. This approach must contribute to the abuse of both the statutory sick pay scheme and any occupational benefit.

The broad but ill-defined use of the word absenteeism should be confined to the situation where the employee disappears from work or just does not turn up, and in neither circumstance does the employee seek permission to leave the workplace or report his absence to the management.

Even single instances of such behaviour should be picked up and logged as the start of a disciplinary process. The employer should make sure employees and line managers fully understand the basic rules. What is at issue here is a clear breach of the terms of the contract of employment. A repeated breach can easily lead to dismissal, subject to the operation of the proper disciplinary procedure.

With most people, if they say they are ill, then they genuinely feel ill. From another angle, however, the position is not so clear. 'Illness threshold' differs quite markedly, so some people will

come to work, while others will rate themselves sufficiently unwell to stay at home.

While employers have to be flexible, no employer can afford to let an unacceptable level of absence continue. A measure of unacceptability is the extent to which the absence upsets the schedule of the organisation.

A basic feature of the statutory scheme of sick pay and, if the employer has one, an occupational sickness benefit scheme to supplement SSP, is accurate record-keeping. This is a statutory requirement put on the employer but not always properly discharged.

There is, however, renewed interest in keeping proper records now the whole cost of SSP falls on larger employers, they want to know where the money goes.

Once an unusual absence has been identified, it should be brought to the employee's attention. It is important to stress, at this point, that this is not a disciplinary matter unless there is evidence that sickness as an excuse covers some other reason for the absence.

Given that the illness is genuine to the satisfaction of the employer, the concept of 'warnings' in the disciplinary sense is inappropriate. This is not to say that the employer must keep silent about the consequences of continued absence; on the contrary, this matter needs to be dealt with quite formally so that the employee is aware that the job may be on the line in due course.

The simple action of drawing to the employee's attention their sickness record, together with an


invitation to discuss the position often has the immediate effect of improving attendance. The employee adjusts their sickness threshold and the problem disappears. However, if illnesses continue, then the employer should request or, if there are powers in the contract of employment, require the employee to see a doctor who has been nominated by the company.

Thus on the basis of medical evidence, consultation then proceeds with the employee in an attempt to find a solution to the problem. If the situation can be overcome, and the employer does not have to turn the place upside down to find an accommodation with the employee, then the employment continues.

If no solution can be found, and here the employer has to be prepared to show a tribunal that he has acted reasonably in coming to that conclusion, then dismissal with notice on grounds of ill health follows.

Ill-health dismissal may be a decision reached with reluctance, but the important considerations are whether there was sufficient evidence to support the dismissal and whether the procedure was reasonable in that it provided for full consultation with the employee.

Consultation carries the implicit point that the employer takes fully into account what the employee says by way of solutions, and only rejects them on reasonable grounds. Following these points will ensure the outcome is as objective as possible, and make it more likely that the employer will be able to defend an unfair dismissal claim brought by the ex-employee.



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- 3. If your assistants are not yet following Counterpart...**use the form below now to register them today. If you have retained the free modules, start your assistants on the course at once and mark the questionnaires as soon as PINs are received.

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Tracy Matthews on 0181 747 8797

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Pharmacists confirm their RPM concerns

Chemist & Druggist
Quarterly Business Trends
in association with

Pharmacists have voiced their fears that up to 3,000 outlets could face closure if Resale Price Maintenance is abolished, according to Chemist & Druggist's latest Business Trends survey

Twenty-six per cent of pharmacists believe their businesses stand very little chance of remaining viable if Resale Price Maintenance is removed on OTC medicines, reports the latest **Business Trends** survey. However, 74 per cent are fairly confident that they would survive.

About a month ago, the Community Pharmacy Action Group warned that up to 3,055 pharmacists, one-quarter of Britain's total, would face ruin without RPM (*C&D* 20 July, page 76).

Multiples seem to be less confident about life without RPM than independents. Just under one-third of multiples which responded feel they would not survive without RPM, compared with a fraction under one-quarter of independents.

Falling margins remain a major worry. Just over half the respondents say their second-quarter margins were lower than those of the same period last year, while 45 per cent say the level has not changed. Both inde-

pendents and multiples are suffering, although respondents whose turnovers exceed \$1 million appear to be affected less than smaller colleagues.

The problem is spread evenly throughout the UK, although it is distinctly worse in Wales. Sixty-nine per cent of respondents from that area say their margins fell in the second quarter.

And while a lucky few managed to increase their margins in some regions around the UK during the second quarter, no one managed to do so in Wales, the North West and the South West.

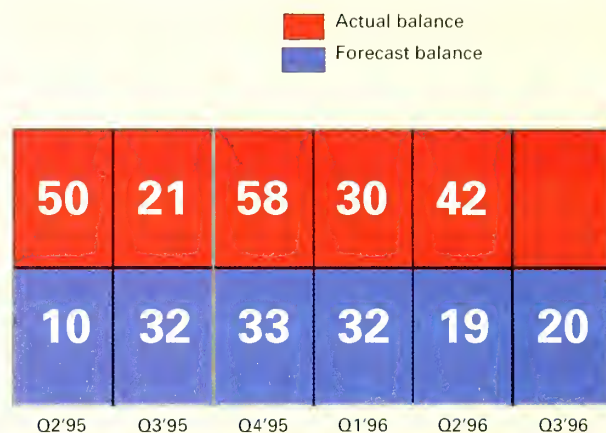
Matters are not expected to improve. Forty-one per cent of respondents expect depressed margins during the third quarter, and 52 per cent say the level will remain unchanged, compared with the same period last year.

Perhaps not surprisingly, a substantial proportion of respondents see little cause for future celebration. Forty-five per cent feel pessimistic about retail pharmacy's prospects over the next quarter, rising to 50 per cent over the next six months and 52 per cent over the next 12 months.

The biggest pharmacies are the most pessimistic. Out of those with turnovers exceeding \$1 million, 67 per cent feel gloomy about the sector's performance over the next quarter, 72 per cent about the next six months, rising to 78 per cent over the next 12 months.

Generally, respondents in the North West and Wales feel more

Trends in volume of NHS prescriptions



The balance is the result of those saying that a particular trend is 'up' minus the proportion who say it is 'down'

pessimistic about pharmacy than their colleagues in other regions.

But the situation changed when respondents were asked how they felt about their own business. Pharmacists may not have much confidence about their lot as a group, but a number have fewer reservations about their own ability to make their businesses work. Nearly one-quarter of the sample feel optimistic about their own business over the next quarter and over the next six months. And 28 per cent feel equally confident about their individual prospects over the next 12 months.

On the flip side, a substantial proportion still remained pessimistic about their own businesses, particularly in Scotland, the North West and Wales.

But pharmacists throughout the UK remain committed to their businesses. While just over a quarter of them have received offers for their outlets, nearly two-thirds have refused to sell.

The overall gloom could be misleading because it masks some impressive sales. Seventy-four per cent of the sample says its turnover during the second quarter – excluding NHS prescriptions – was either the same, or higher, than the same period last year. And nearly one-third expect a higher turnover during the third quarter.

Pharmacist talk-back

The April to June **Business Trends** survey asked pharmacists how much they planned to increase staff wages this year, bearing in mind the Joint Industrial Council for Retail Pharmacy's recommendation of a 2.7 per cent pay increase for shop and dispensing assistants.

Fifty-nine per cent will increase wages by 3 per cent to 5. And 11 per cent plan to exceed 5 per cent.

Independents appear to be more generous than multiples: 29 per cent of the independents plan wage increases of 4 per cent or more, compared with 14 per cent of multiples.

Meanwhile, 81 per cent of multiples employ a locum every week, while just over half of the independents do. On average, locums work 11 hours a week and receive around £12 per hour. Independents and multiples pay identical rates, with virtually no regional variation.

Do pharmacists attend events? Nearly two-thirds had not attended a Royal Pharmaceutical Society branch meeting in the last quarter, and 82 per cent had not gone to a National Pharmaceutical Association branch meeting. But 52 per cent had attended a supplier-sponsored event and 46 per cent had taken part in a Centre for Pharmacy Postgraduate Education workshop. Forty-one per cent went to other professional meetings.

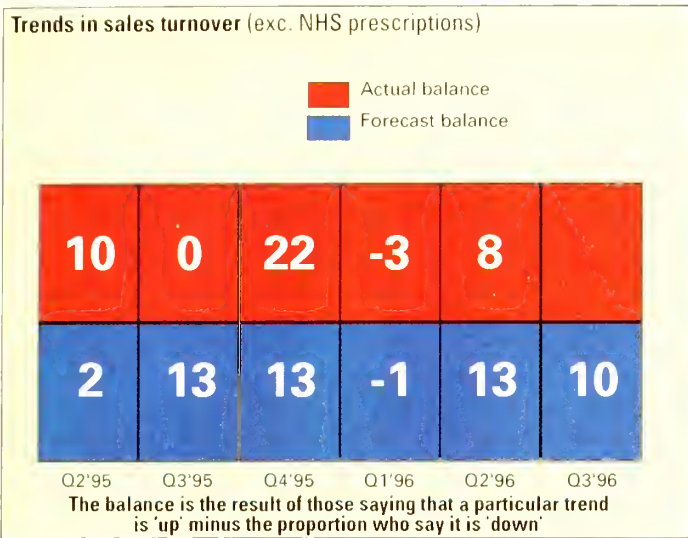
Pharmacists in Wales were less likely to attend any sort of event, workshop or meeting than colleagues elsewhere in the country.

Trends in margins

Actual balance
Forecast balance



The balance is the result of those saying that a particular trend is 'up' minus the proportion who say it is 'down'



That confidence is spread throughout the UK, with one notable exception. Just under one-third of pharmacists in Wales think their turnover next quarter will be lower than that of the same quarter last year.

NHS prescriptions have fared particularly well. Eighty-six per cent say the volume of prescriptions for the second quarter is at least as high or better than it was during the same period last year. And 85 per cent expect a similar result for the third quarter. Some of the best performances come from pharmacies in south west England and in Scotland. Eighty-one per cent of those in the South West and 70 per cent in Scotland say these prescriptions are up on those of the same period last year.

Pharmacists in most regions expect to deal with more NHS scripts in the third quarter, compared with the same period last year. But 38 per cent in Wales say their prescriptions will fall during the next quarter.

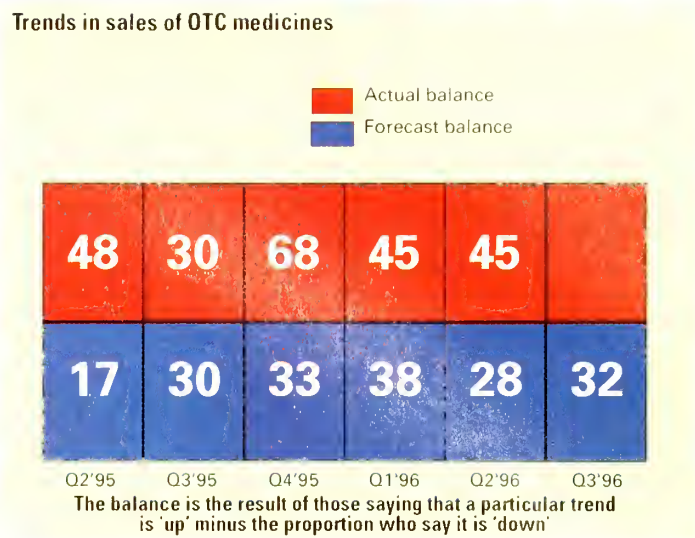
OTC medicines are another star area. Fifty-five per cent of the sample say their sales of OTCs are up for the second quarter. Those in the Midlands, the South West and Scotland did particularly well. However, pharmacists in the North East had relatively mixed fortunes. One-third

saw their OTC sales fall during the second quarter, although these are expected to pick up during the third quarter.

Forty-two per cent of the total sample expect their OTC sales to improve again next quarter.

In contrast, cosmetic sales are poor. More than one-third say they sold fewer cosmetics in the second quarter, and a little under one-third expect them to remain depressed during the third quarter. Only the larger pharmacies avoided a significant fall in sales during the second quarter.

But the real villains are fra-



grances, whose second quarter sales fell 54 per cent and are forecast to drop 42 per cent during the third quarter.

Toiletry sales are also down on those of last year, especially in the North West and Scotland.

With the erratic weather during spring and summer, demand for photo processing has not been as high as expected. Twenty-two per cent of pharmacists say their photoprocessing sales were down in the second quarter, although most of them believe their orders will improve during the next quarter.

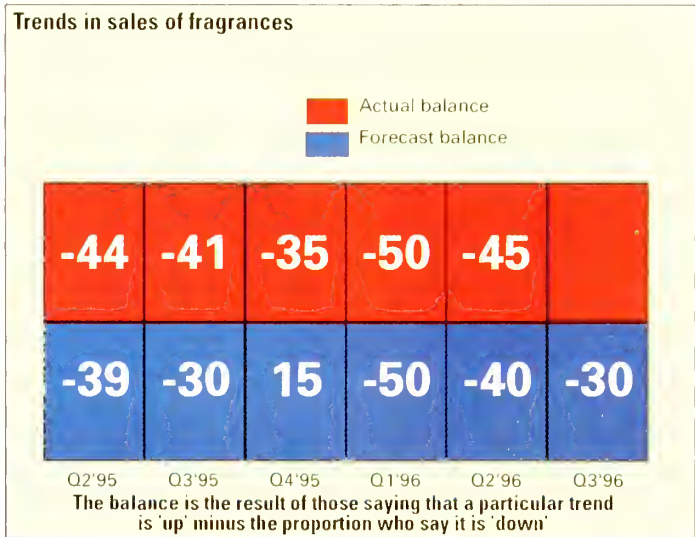
Babycare sales are generally static, but they are proving especially bad for larger pharmacists. Forty-four per cent say their second quarter sales are down. And 56 per cent see no improvement during the third quarter. Wales, Scotland and the North West are the worst-affected regions.

Meanwhile, sales of analgesics, indigestion/stomach upset remedies and vitamins are generally buoyant and are expected to remain so.

● Questionnaires were sent to 484 members of the *Chemist & Druggist* retail business trends panel, of which 200 replied.

● Sixty-seven per cent of the respondents were independents, 21 per cent were multiples with two to five outlets, 7 per cent were multiples with six to 20 outlets, while 4 per cent had more than 20 outlets. One per cent of the sample did not say how many outlets they owned.

● Members of the panel were asked how well their businesses were doing (in terms of turnover, margins etc) for April-June 1996, compared with the same period last year. And they were asked to forecast their performance over the next three months.



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Gehe confirms its acquisitions agenda



Gehe's finance director, Dr Karl-Gerhard Eick

Gehe is determined to stick to its ambitious acquisition strategy, whether or not it takes over Lloyds Chemists.

Dr Karl-Gerhard Eick, Gehe's finance director, says the group will still be looking for more outlets "after a certain period", even if it succeeds in its bid for Lloyds.

"If we don't get Lloyds, we'll still keep the [acquisition] strategy. We would still want to increase our shops significantly," says Dr Eick. Losing Lloyds will not limit its plans – they will just take longer to fulfil, he adds.

He admits that its acquisition programme has slowed down this year, mostly because of the drawn-out bid war for Lloyds. From January to June, this year, it bought 13 pharmacies and took out a lease on one. But it also sold eight outlets. Dr Eick says the group has a target of pharmacies it wants to buy, but it is keeping the figure confidential for commercial reasons.

The company's strategy is coming under closer scrutiny because it is close to finalising its list of buyers for

seven Lloyds' wholesale buyers. Dr Eick says its list will be ready "in advance" of the October 18 deadline, and some press reports suggest it will be ready within the next two weeks. Both Gehe and Unichem must find buyers for selected Lloyds' wholesale depots if they want the Department of Trade and Industry to consider their eligibility to re-bid.

Speculation now centres on how much Gehe would want to pay for Lloyds. Since the sale of the wholesaler's depots was imposed last month, the German company has hinted that Lloyds is not worth as much as it was earlier this year. Lloyds' profit warning last month may have strengthened Gehe's case, but the unknown factor is still how the companies will react when Lloyds is set before them, assuming both win the DTI's approval.

Gehe, meanwhile, is pleased with the current performance of AAI, which increased its operating profit by 18 per cent to \$215 million for the six months to June 30, compared with the same period last year. AAI's wholesale division saw its turnover rise 7.7 per cent to \$739m, while its operating profit grew 21 per cent to \$173m.

Stefan Meister, AAI's group finance director, says it is grabbing some of Unichem's share of the UK pharmaceutical

wholesale market. He believes AAI's share will continue to grow because of the money it has spent, and that it will continue to spend to restructure its warehouses.

AAI has spent \$10m on its capital expenditure programme and intends to spend the same again. The company has 12 warehouses, six of which have been

automated, and it expects to automate another two to four. "This automation will be volume-driven," comments Dr Eick. "But we won't automate more than ten out of our 16 warehouses."

Dr Eick adds that AAI's investment programme could be altered if Gehe acquires Lloyds. "If we take over Lloyds, it could affect our distribution business," he says. "It's hard to say whether AAI will be a stand-alone business or whether it will be merged with Lloyds. But if we deliver to Lloyds' shops, our throughput will increase and we'll have more scope for automation."

AAI's retail division, which includes the Medimart chain that it acquired last year, increased its operating profits by 17.3 per cent to \$6.1m.

Geoff Cooper, Unichem's finance director, says Gehe will not gain any advantage from being the first to submit its buyers' list. "It should be the reverse. Anyone who's interested in buying the depots will reach an agreement with Unichem and Gehe. There's no point in [the buyers] dealing with just one party," says Mr Cooper.

Unichem has a list of 20-30 people who are interested and these include a "hand core num-

ber" of organisations which are definitely interested. But Mr Cooper refuses to suggest when his list will be ready.

Lloyds is handling the buying process for its depots – it is negotiating agreements in principle with potential buyers. Unichem and Gehe have to confirm whether they are prepared to honour these agreements.

Mr Cooper was not impressed with Gehe's comments about Lloyds' potential worth. "Gehe were game-playing and I don't think they were taken seriously. Gehe attempted to lower Lloyds' share price with their comments, but Lloyds' share price rose the day after Gehe's announcement, so their plan didn't work," explains Mr Cooper.

Lloyds' share price rose 12p to 482p last Friday following news that Unichem's advisers were confident that the company could have its buyers' list ready within the next two weeks, according to the *Financial Times*.

If we don't get Lloyds, we'll still keep the strategy

Astra builds on core strengths to improve latest sales figures

Strong performances from Astra's core products helped to lift its sales by 6 per cent to SEK19,077 million for the six months to June, compared with the same period last year. The company's earnings before taxes rose 7 per cent to SEK6,756m.

Sales of Losec, its anti-peptic ulcer agent and its best-selling product, grew 11 per cent to SEK8,551m. Worldwide sales of the drug amounted to about SEK11,780m.

Astra says Austria has become the first country to permit Losec to be used to treat peptic ulcers that have been caused by certain anti-inflammatory drugs (NSAIDs). More than a quarter of gastric ulcers and about 5 per cent of duodenal ulcers are believed to be related to NSAID treatment, according to the company.

Pulmicort, the anti-asthma product, saw its sales rise 4 per cent to SEK2,292m. And the beta blocker Seloken, the com-

pany's most popular product in its cardiovascular range, increased its sales by 2 per cent to SEK1,237m. Meanwhile, sales of Plendil, its vasodilator, rose 13 per cent to SEK979m.

However, the company's pain control range saw its sales fall 6 per cent to SEK1,609m, although it says this represent a rise of 5 per cent at constant exchange rates.

Astra has signed an agreement with California-based Vivus to

market a new therapy for erectile dysfunction. Astra will have exclusive marketing and distribution rights in Europe, Latin America, Australia and New Zealand. The company is expected to apply for the therapy's registration in Europe this year.

Astra and the German pharmaceutical company Byk Gulden recently agreed to end their ongoing dispute regarding Astra's patents on acid-related disorders.

Novartis heads south

Novartis, the company to be formed by the merger of Ciba and Sandoz, has decided to concentrate all its pharmaceutical activities in south east England. All the relocations are expected to be completed within the next three years.

Novartis UK's pharmaceutical headquarters will be at Sandoz's facility in Frimley, Surrey. New offices to help accommodate the extra staff will be built on land that Sandoz owns opposite the site. They are expected to be completed in about 18 months.

The Frimley-based Sandoz clinical development centre, which co-ordinates clinical trials, collects data and provides analyses, will move to Novartis at Horsham. That site will also expand its research and development division.

Meanwhile, international project teams in the UK will be joined by the global respiratory therapeutic area now in Basle. But Novartis says it is too early to

say where in southern England these specialists will be based.

A new respiratory drug discovery unit will also be located in the South, where it will combine Novartis' international resources with the respiratory pharmaceutical development expertise already in the UK.

Novartis' combination chemistry expertise will be absorbed into the pharmaceutical business, transferring from Macclesfield to southern England. Its self-medication business will move to Horsham.

As the group will have overcapacity in various areas, including manufacturing and certain drug development fields, it has decided to close a plant at Horsforth in Yorkshire, and a drug safety testing unit in Cheshire.

The plant employs about 120 and it is expected close in 1998. A few of its workers will be relocated, but most will be made redundant. Novartis has under-

taken to give all laid off personnel career counselling.

Decommissioning of the Cheshire unit will begin in mid-1997 and its work will be done outside the UK. Most of its 100 staff will also be made redundant, although some may be able to relocate abroad.

But the Sandoz Institute for Medical Research, which seeks treatment for chronic pain, will remain at University College, London.

A 'country' group will be responsible for Novartis in the UK, led by Bill Fullager. Its headquarters will probably be at Frimley. Jacques Racloz heads Novartis' UK pharmaceutical operations.

The European Union recently approved the creation of Novartis, but the merger is still waiting for approval from the US Federal Trade Commission, whose decision is expected some time next month.

US licence for Medeva

Medeva has been granted a licence by the US Food and Drug Administration for its albuterol (salbutamol) metered-dose inhaler. The inhaler will be manufactured by Armstrong Pharmaceuticals, Medeva's US subsidiary, and is expected to be launched in the US in autumn.

Unichem bank tips

Unichem has published advice on how pharmacists can build successful relationships with their bank managers. The guidelines include: contact your bank regularly, eg every six months; if you are meeting your bank manager, stick to the point and keep it brief because banks charge for their time; and keep personal and company borrowings at separate banks to minimise confusion between the two. For more information, telephone Unichem on 0181 391 2323.

BOC healthcare sales down

The BOC Group's pre-tax profits rose 11 per cent to £327 million on a turnover of £2,805m for the nine months to June 30, compared to the same period last year. But its healthcare division's operating profit fell 15 per cent to £39.1m, while the turnover was down 4 per cent to £371.1m. BOC said the figures reflected weak demand in the US medical systems market and continuous price pressure on Forane, its anaesthetic pharmaceutical.

AHA on the move

AHA Sales & Marketing has moved to: 16a St Mary's Street, Wallingford, Oxfordshire OX10 0EW, telephone: 01491 833202.

VMS market predicted to grow by 31pc by 1999

Sales of vitamins, minerals and supplements are expected to grow nearly 31 per cent to \$395 million over the next three years, reports the latest survey by market researcher Corporate Intelligence on Retailing.

By 1999, the minerals and supplements market should have grown close to 37 per cent at \$276m, while sales of vitamins will have risen 19 per cent to \$119m.

CIR says the extra sales will partly reflect Britain's ageing

population. By 2006, people over 35 years old are expected to account for 56.3 per cent of the population, up nearly six percentage points on the ratio in 1990. And this age group is the main consumer of vitamins, minerals and supplements.

A growing awareness of health/fitness issues and preventative medicines will boost VMS sales among younger and first-time consumers. About 750,000 new consumers entered the VMS

market between 1994 and 1995.

Pharmacists accounted for 50 per cent of VMS sales last year, but their share of the market is declining, according to the report.

However, Boots has close to one-third of the market and its share is growing, as is that of multiple grocers and drugstores.

'Retail Business Market Surveys, July 1996, No 461', Corporate Intelligence on Retailing. Tel: 0171 696 9006.

Cantab Pharmaceuticals bullish about future

Cantab Pharmaceuticals has reported a loss of \$3.696 million for the six months to June, up 4 per cent on its losses over the same period last year.

But the biotechnology company is extremely optimistic about its future, following an equity placing last month that raised \$25.7m, net of expenses. This will fund its development programmes, which include the DISC HSV product that aims to treat and prevent genital herpes. The Medicines Control Agency has allowed Cantab to begin human clinical trials for DISC HSV. Phase I of the UK clinical trials will evaluate its safety and immunogenicity in subjects who are seropositive for herpes simplex virus type 2 (HSV-2). Cantab also plans to run a

Phase I clinical trial in the US in seronegative subjects (who have had no exposure to HSV-2) later this year, subject to approval from the US Food and Drug Administration.

Meanwhile, last month, the company formed a collaboration with Smithkline Beecham Biologicals Manufacturing to develop and market Cantab's TA-GW vaccine for genital warts. Under the agreement, Cantab will receive up to \$24m, plus royalties, in return for the transfer of TA-GW's worldwide development, manufacturing and marketing rights to SBBio.

Cantab is appointing Jurek Sikorski as its chief executive. Paul Hlaycock, the company's current chief executive, will become vice chairman.

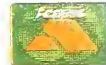


CP Pharmaceuticals has chosen Wrexham Hospice to receive a donation of £5,000 which it recently won in a competition. The company, which is based in the Clwyd town, came first in the Welsh regional final of 3i's 'Quest for Growth' competition, with a first prize of a £5,000 charitable donation. The competition, launched in March, aims to identify Britain's best medium-sized independent business. CP now goes through to the finals to be held in London in October. Pictured from the left are: John Hardcastle of 3i; CP Pharmaceuticals' secretary to the chief executive, Sarah Stevens; CP's business systems manager, John Maguire; and Duncan Miller of Nightingale House Hospice, Wrexham

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Further details from Lorraine Perry (Senior Technician, Dispensary)/Sara Brown (Senior Technician TSU), tel: 01703 634288 ext 2348/2775.

For an application form and job description, please contact the Personnel Department, Level C, Centre Block, Southampton General Hospital, Tremona Road, Shirley, Southampton SO16 6YD, tel: 01703 796083, quoting job no: SO92.

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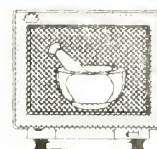
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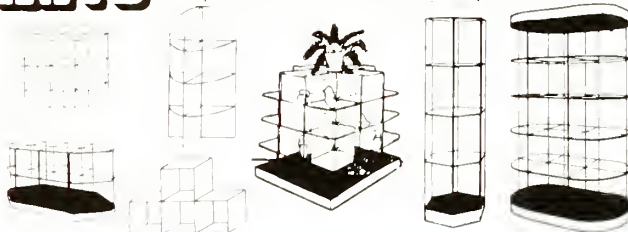
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Nothing in life is ever black or white, except in the good of Hollywood movies, maybe. We knew the good guys from the bad guys and family life was clear-cut and clean-cut. Ma, pa and the kids were the epitome of the all-American happy family, complete with cheesy grins, home-made apple pie and Star-spangled banner. Or so it seemed until Kate Sweeney decided to scratch beneath the celluloid for her latest play, 'Monochrome Days'.

The production, which has just been staged at Cambridge as part of the Camfest (a rising contender to the Edinburgh Festival), revolves around an unhappy man who escapes into the make-believe world of a 1940s black and white film only to discover life to be rife with secrets.

The main inspiration, says Kate, was the back to basics ideology. Just because a family looks like a normal, happy one doesn't mean it is. Another was her love of the old Hollywood movies. "There is an innocent side to it all," she says.

Cue Kate's real life in full technicolour ... King's Road, London, 1979.

Kate left her home in Sheffield and moved down to Chelsea to start her pharmacy degree. She was soon lured away from writing up her chemistry practicals by the bright lights of the West End's theatre-land. Things could have turned out differently, though. Punk was at its peak and the King's Road had turned into a mecca for safety pins, bondage trousers and pink mohicans.

Queuing up for student standbys (cheap theatre tickets) became a regular pastime, but it was only when she went to see one particular play that she was moved to writing. "Someone took me to see 'Whose life is it anyway?'. All it consisted of was a bed in the centre of the stage with a paraplegic [man] on it. It gripped the audience and it made me think that there must be something very good there to keep everyone's attention like that."

Kate says she has always wanted to write and was good at English at school. In fact, she is surprised that she drifted in the direction of pharmacy in the first place. So, as soon as she finished her degree, she started writing short stories, polishing her technique at writing classes. But when she realised that she didn't



DRAMA QUEEN

Kate Sweeney's love of the theatre went beyond queuing up for student standbys. Fawz Farhan finds out how her passion propelled her into writing and staging her own plays

like the "descriptive bits" and that they were nearly all dialogue, she moved on to writing plays.

The turning point came in 1988 when, after a series of community and hospital pharmacy jobs in London, Bristol and Bath, she decided to start locuming so that she could spend more time on her writing. She now lives in Godmanchester in Cambridge and has the ideal set-up: work three days a week, write two days a week. And she gets to have the weekend to herself.

"I haven't got the responsibility of running a shop and it gives me the freedom to take a few days off when I want to ... Pharmacy is a good job to have, but it isn't very exciting." Nevertheless, she takes her profession seriously and is keen to keep the two lives separate.

Her writing credits so far have included two short stories broad-

cast on Radio Bristol in 1989; 'Cramp' shortlisted for the 1991 Bristol Old Vic playwriting competition; 'Performing Dogs' staged at the Theatre Museum in Covent Garden, London, in 1995; and 'Hot Sea' performed at The East Dulwich Tavern earlier this year.

Throughout her work there is always an element of black humour. "I don't like humour for humour's sake. There has to be something underneath." She blames this dark streak on her being 'Northern' - born and bred in Sheffield, the land of stainless steel cutlery, a football team named after a day of the week, and Jarvis Cocker of Pulp, who literally leapt to international fame when he jumped on stage and interrupted Michael Jackson's 'messiah routine' at this year's Brit Awards.

Being handed things on a plate is not an option for Kate and she

normally has to fight hard to get her work staged under the banner of the Big Idea Production, which she runs with her husband, Richard. His official title is either 'dog's body' or 'best boy', depending on how she is feeling on the day, but Richard brings with him his invaluable expertise in making props and designing programmes.

Writing plays is a slow process and one can take a year to complete. Kate has accepted the fact that she may never make enough money to give up pharmacy altogether. "If I can get plays on and keep writing, I'll be happy. It would be nice to get paid eventually," she muses.

She is not alone in finding her work under financial constraint. British theatre as a whole is being hindered by a lack of funding and support. "Only the National Theatre is sticking it out," says Kate and she draws parallels with the hardship experienced during Restoration theatre on which 'Performing Dogs' is based. "All theatres were going bankrupt then, just as they are now, and they had to put on musicals [to stay financially viable] just as they are now." After all,

where would British theatre be now without the likes of Andrew Lloyd-Webber?

A cross-section of creativity is essential, insists Kate, who would like to see new writing and new voices coming in. "Theatre has

gone away from the cutting edge of drama. I still believe in entertaining the audience and giving them something to think about."

One of her role models is Alan Bennett, again for being 'Northern'. And if she could cast anyone for her plays, it would have to be Michael Gambon "for his fantastic stage presence" and Emma Thompson - "I admire her greatly even though they [the critics] slag her off." Kate would love to follow in Emma's footsteps, but her talents do not stretch to acting. She failed the audition for a part in her own play, 'Monochrome Days', much to her disappointment and embarrassment!

And finally to Shakespeare, who is the central character in her next venture. In it she exposes the old bard as a woman, following the trend of other conspiracy theories about his sexuality. Things are never black and white, after all.

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